

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Jones, Melissa, , ,		Date of Public Distribution/Dissemination 09 / 23 / 2016	
Mailing Address 3607 S Elm Eugene St		Amount 22.80	
City Greensboro	State NC	Zip Code 27406-7405	Transaction ID : VN7CZA3XT50
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2055523.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jones, Anita, , ,		Date of Public Distribution/Dissemination 09 / 23 / 2016	
Mailing Address 506 Wigman Dr		Amount 34.20	
City Maitland	State FL	Zip Code 32751-6936	Transaction ID : VN7CZA3WHB1
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 149877.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jones, Anita, , ,		Date of Public Distribution/Dissemination 09 / 23 / 2016	
Mailing Address 506 Wigman Dr		Amount 34.20	
City Maitland	State FL	Zip Code 32751-6936	Transaction ID : VN7CZA3WK65
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2055523.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.20
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	