

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Hemingway, Jonathan, , ,		Date of Public Distribution/Dissemination 10 / 04 / 2016	
Mailing Address 400 Montrose Dr Apt C		Amount 22.80	
City Greensboro	State NC	Zip Code 27407-1272	Transaction ID : VN7CZA4NKS3
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		2055523.74	

Full Name (Last, First, Middle Initial) of Payee Henry, Lawrence, , ,		Date of Public Distribution/Dissemination 10 / 04 / 2016	
Mailing Address 4924 Eaglesmere Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32819-5620	Transaction ID : VN7CZA4KFW2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Murphy, Patrick, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		149877.17	

Full Name (Last, First, Middle Initial) of Payee Henry, Lawrence, , ,		Date of Public Distribution/Dissemination 10 / 04 / 2016	
Mailing Address 4924 Eaglesmere Dr		Amount 34.20	
City Orlando	State FL	Zip Code 32819-5620	Transaction ID : VN7CZA4KHS2
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Clinton, Hillary, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		2055523.74	

(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)	