

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Red Roof Inn		Date of Public Distribution/Dissemination 10 / 15 / 2016	
Mailing Address 1813 S Saunders St		Amount 13.25	
City Raleigh	State NC	Zip Code 27603-2315	Transaction ID : VN7CZA5EWP4
Purpose of Expenditure Lodging	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 Reed, Cindy, , ,		Date of Public Distribution/Dissemination 10 / 15 / 2016	
Mailing Address 23116 39Th Ave E		Amount 1.63	
City Spanaway	State WA	Zip Code 98387-6964	Transaction ID : VN7CZA5EA02
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Rubio, Marco, , ,		Check One: <input type="checkbox"/> Support <input checked="" 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 Reed, Cindy, , ,		Date of Public Distribution/Dissemination 10 / 15 / 2016	
Mailing Address 23116 39Th Ave E		Amount 6.25	
City Spanaway	State WA	Zip Code 98387-6964	Transaction ID : VN7CZA5EA10
Purpose of Expenditure Per Diem	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input 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) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	21.13
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	