11/07/2016 18 : 24

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Image# 201611079037134426 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Schedule E) PAGE 1 OF 4 FOR SE OF FORM 24/48							
NAME OF COMMITTEE (In Full)							
	Vorking America Coalition						
			C C00620583				
Check if 🗶 24-hour report 48-hour report 🗶 New report Amends report filed on Mark / Data / Yang Yang Yang Yang Yang Yang Yang Yang							
	Full Name of Payee		Date of Public Distribution/Dissemination				
	Mosaic		11 / D D / Y Y Y Y 2016				
	Mailing Address 4801 Viewpoint Place		Amount				
	City State	Zip Code	15.00				
	Cheverly MD	20781	Transaction ID : D619861 Date of Disbursement or Obligation				
	Purpose of Expenditure Fliers	Category/ Type 004	M 11 / D D / Y Y Y Y 11 06 / 2016				
	Name of Federal Candidate	X Support Of	ffice Sought: House District:				
	MURPHY, PATRICK, , ,	Oppose	President Senate State: FL				
	Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary				
	Full Name of Payee		Date of Public Distribution/Dissemination				
	Mosaic		11 06 <u>Y Y Y Y</u> 11 06 2016				
	Mailing Address 4801 Viewpoint Place		Amount				
	City State	Zip Code	48.00				
	Cheverly MD	20781	Transaction ID : D619862 Date of Disbursement or Obligation				
	Purpose of Expenditure Fliers	Category/ Type 004	M M / D D / Y Y Y Y 11 06 / 2016				
	Name of Federal Candidate	X Support O	Office Sought: House District:				
	MURPHY, PATRICK, , ,	Oppose	President Senate State: FL				
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary				
	(a) SUBTOTAL of Itemized Independent Expenditures	••••••	63.00				
	(b) SUBTOTAL of Unitemized Independent Expenditures	•••••••••••••••••••••••••••••••••••••••					
	(-) TOTAL Independent Expenditures						
	(c) TOTAL Independent Expenditures	• • • • • • • • • • • • • • • • • • •					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
	King, Crystal, , , [Elect	ctronically Filed] Date	11 07 2016				
	Signature						

Image# 201611079037134427 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Sc	(Schedule E) PAGE 2 OF 4 FOR SE OF FORM 24/48						
	NAME OF COMMITTEE (In Full)						
N	orking America Coalition			С	C00620583		
				U	000020303		
Ch	eck if 🗴 24-hour report 🗌 48-hour report 🗶 New re	port Amends repor		M /			
	Full Name of Payee		Date o	of Public	c Distribution/Dissemination		
	Mosaic		М	11 /	06 / Y Y Y Y 06 2016		
	Mailing Address 4801 Viewpoint Place		Amour				
	City State	Zip Code			7.50		
	Cheverly MD	20781			ID : D619863		
	Purpose of Expenditure				ursement or Obligation		
	Fliers	Category/ Type 004		11	/ 06 / Y Y Y Y 2016		
	Name of Federal Candidate	× Support	Office Sough	t: [House District:		
	Rodham Clinton, Hillary, , ,	Oppose	× Preside	ent	Senate State:		
	Calendar Year-To-Date		Disbursemen	t For:	Primary X General		
	Per Election for Office Sought	380938.54	2016 O	ther (sp	pecify) ►		
	Full Name of Payee		Date of	of Publi	c Distribution/Dissemination		
	Mosaic		M	11	/ D D / Y Y Y Y 06 2016		
	Mailing Address 4801 Viewpoint Place			-	2010		
			Amou	nt			
	City State	Zip Code			24.00		
	Cheverly MD	20781			D: D619864 ursement or Obligation		
	Purpose of Expenditure	Category/ 004					
	Fliers	Type 004	_ L	11	06 2016		
	Name of Federal Candidate	X Support	Office Sough	t:	House District:		
	Rodham Clinton, Hillary, , ,	Oppose	× Preside		Senate State:		
	Calendar Year-To-Date		Disbursemen	L	Primary X General		
	Per Election for Office Sought	380938.54	2016				
Γ	(a) SUBTOTAL of Itemized Independent Expenditures						
(b) SUBTOTAL of Unitemized Independent Expenditures							
	c) TOTAL Independent Expenditures						
				-7			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
	King, Crystal, , ,		M M /	D D	/		
	[Electro	nically Filed] Date	11	07	2016		
	Signature						

Image# 201611079037134428 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Sc	(Schedule E) PAGE 3 OF 4 FOR SE OF FORM 24/48						
W	Working America Coalition						
			C C00620583				
Che	Check if 🗶 24-hour report 48-hour report 🗶 New report Amends report filed on 48-hour report						
Т	Full Name of Payee		Date of Public Distribution/Dissemination				
	Mosaic		11 06 Y Y Y Y Y 11 06 2016				
	Mailing Address 4801 Viewpoint Place		Amount				
	City State	Zip Code	7.50				
	Cheverly MD	20781	Transaction ID : D619865 Date of Disbursement or Obligation				
	Purpose of Expenditure Fliers	Category/ Type 004	11 / D D / Y Y Y Y Y 11 06 / 2016				
	Name of Federal Candidate	x Support	Office Sought: House District:				
	MURPHY, PATRICK, , ,	Oppose	President X Senate State: FL				
	Calendar Year-To-Date Per Election for Office Sought	108067.59	Disbursement For: Primary X General 2016 Other (specify) ►				
- [Full Name of Payee		Date of Public Distribution/Dissemination				
	Mosaic		M M / D D / Y Y Y Y 11 06 2016				
ŀ	Mailing Address 4801 Viewpoint Place						
			Amount				
ŀ	City State	Zip Code	24.00				
	Cheverly MD	20781	Transaction ID : D619866				
ŀ	Purpose of Expenditure	Catagory	Date of Disbursement or Obligation				
	Fliers	Category/ Type 004	11 06 2016				
	Name of Federal Candidate	Support	Office Sought: House District:				
	MURPHY, PATRICK, , ,	Oppose	President X Senate State: FL				
ŀ	Octored a Maria Ta Data		Disbursement For: Primary X General				
	Calendar Year-To-Date Per Election for Office Sought	108067.59	2016 Other (specify) ▶				
(a) SUBTOTAL of Itemized Independent Expenditures							
(b) SUBTOTAL of Unitemized Independent Expenditures							
(c) TOTAL Independent Expenditures						
v	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
	King, Crystal, , , [Electron	nically Filed] Date	11 07 2016				
	Signature						

Image# 201611079037134429 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Sc	(Schedule E) PAGE 4 OF 4 FOR SE OF FORM 24/48						
W	/orking America Coalition		C C00620583				
			0				
Ch	Check if X 24-hour report 48-hour report X New report Amends report filed on / Y Y Y Y Y Y						
	Full Name of Payee New Partners Consulting, Inc.		Date of Public Distribution/Dissemination				
			11 06 2016				
	Mailing Address 1250 Eye Street, NW #200		Amount				
	City State	Zip Code	69433.75				
	Washington DC	20005	Transaction ID : D619867 Date of Disbursement or Obligation				
	Purpose of Expenditure Voter Outreach Calls	Category/ Type 004	M 11 / D D / Y Y Y Y 11 06 / 2016				
	Name of Federal Candidate	x Support	Office Sought: House District:				
	BAYH, EVAN, , ,	Oppose	President X Senate State: IN				
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary				
	Full Name of Payee		Date of Public Distribution/Dissemination				
	New Partners Consulting, Inc.		11 06 Y Y Y Y Y				
	Mailing Address 1250 Eye Street, NW #200						
			Amount				
	City State	Zip Code	45956.50				
	Washington DC	20005	Transaction ID : D619868 Date of Disbursement or Obligation				
	Purpose of Expenditure Voter Outreach Calls	Category/ Type 004	11 / D D / Y Y Y Y 11 06 / 2016				
	Name of Federal Candidate	X Support	Office Sought: House District:				
	KANDER, JASON, , ,	Oppose	President X Senate State: MO				
	Calendar Year-To-Date		Disbursement For: Primary X General				
	Per Election for Office Sought	164852.71	2016 Other (specify) ▶				
(a) SUBTOTAL of Itemized Independent Expenditures							
(b) SUBTOTAL of Unitemized Independent Expenditures							
	(c) TOTAL Independent Expenditures		▶ 115516.25				
,	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
		nically Filed] Date	M = M / D = D / Y = Y = Y = Y 11 07 2016				
	Signature						