

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Chris Gentilviso		Date of Public Distribution/Dissemination 08 / 15 / 2016	
Mailing Address 815 16th St NW		Amount 9.87	
City Washington	State DC	Zip Code 20006-4101	Transaction ID : VN7CZA2A707
Purpose of Expenditure Salary and Benefits	Category/Type	Office Sought: <input type="checkbox"/> House State: IL <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: Duckworth, Tammy, , ,		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		60647.58	

Full Name (Last, First, Middle Initial) of Payee Christiani, Michael, , ,		Date of Public Distribution/Dissemination 08 / 15 / 2016	
Mailing Address 5024 Millenia Blvd Apt 201		Amount 8.73	
City Orlando	State FL	Zip Code 32839-5648	Transaction ID : VN7CZA2AN48
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		1055730.77	

Full Name (Last, First, Middle Initial) of Payee Christiani, Michael, , ,		Date of Public Distribution/Dissemination 08 / 15 / 2016	
Mailing Address 5024 Millenia Blvd Apt 201		Amount 8.73	
City Orlando	State FL	Zip Code 32839-5648	Transaction ID : VN7CZA2ANW7
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		1055730.77	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27.33
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	