

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Ushry, Brandon, , ,		Date of Public Distribution/Dissemination 09 / 22 / 2016	
Mailing Address 5120 Hawaiian Ter Apt 5		Amount 68.40	
City Cincinnati	State OH	Zip Code 45223-1167	
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
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 1055730.77		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3VMX1

Full Name (Last, First, Middle Initial) of Payee Ushry, Brandon, , ,		Date of Public Distribution/Dissemination 09 / 22 / 2016	
Mailing Address 5120 Hawaiian Ter Apt 5		Amount 68.40	
City Cincinnati	State OH	Zip Code 45223-1167	
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
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 1055730.77		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3VPG2

Full Name (Last, First, Middle Initial) of Payee VanLeinbock, Ludvick, , ,		Date of Public Distribution/Dissemination 09 / 22 / 2016	
Mailing Address 806 Nana Ave		Amount 10.69	
City Orlando	State FL	Zip Code 32809-5914	
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
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 43263.96		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : VN7CZA3VTE4

(a) SUBTOTAL of Itemized Independent Expenditures.....	147.49
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	