

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Working America

Full Name (Last, First, Middle Initial) of Payee Thompson, Linda, , ,		Date of Public Distribution/Dissemination 09 / 28 / 2016	
Mailing Address 8235 Clarcona Ocoee Rd		Amount 34.20	
City Orlando	State FL	Zip Code 32818-1271	Transaction ID : VN7CZA468V6
Purpose of Expenditure Salary and Benefits	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: 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)	

Full Name (Last, First, Middle Initial) of Payee Thorntons		Date of Public Distribution/Dissemination 09 / 28 / 2016	
Mailing Address 800 W Lake St		Amount 7.61	
City Addison	State IL	Zip Code 60101-2050	Transaction ID : VN7CZA465W8
Purpose of Expenditure Gas	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Kirk, Mark, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 60647.58		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Thorntons		Date of Public Distribution/Dissemination 09 / 28 / 2016	
Mailing Address 800 W Lake St		Amount 7.61	
City Addison	State IL	Zip Code 60101-2050	Transaction ID : VN7CZA465Z1
Purpose of Expenditure Gas	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Duckworth, Tammy, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 60647.58		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.42
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	