

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation AFT Solidarity		3. FEC Identification Number C C90015140
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 555 New Jersey Ave. N.W.		
(c) City, State and ZIP Code Washington DC 20001		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on

M M	/	D D	/	Y Y Y Y Y Y
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5. COVERING PERIOD:

FROM

M M	/	D D	/	Y Y Y Y Y Y
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THROUGH

M M	/	D D	/	Y Y Y Y Y Y
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6. TOTAL CONTRIBUTIONS.....	0.00
7. TOTAL INDEPENDENT EXPENDITURES	176438.07

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 any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Johnson, Lorretta, , ,

Johnson, Lorretta, , ,

10/23/2018

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
AFT Solidarity

Full Name (Last, First, Middle Initial) of Payee Great American Media		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2018	
Mailing Address 3050 K Street Suite 100		Amount 27500.00	
City Washington	State DC	Zip Code 20007	Transaction ID : F57.4356
Purpose of Expenditure Media Time Buy	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 14
Name of Federal Candidate Supported or Opposed by Expenditure: UNDERWOOD, LAUREN A, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify)	
		27500.00	

Full Name (Last, First, Middle Initial) of Payee Great American Media		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2018	
Mailing Address 3050 K Street Suite 100		Amount 27500.00	
City Washington	State DC	Zip Code 20007	Transaction ID : F57.4357
Purpose of Expenditure Media Time Buy	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 14
Name of Federal Candidate Supported or Opposed by Expenditure: HULTGREN, RANDY, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify)	
		55844.04	

Full Name (Last, First, Middle Initial) of Payee NP Consulting Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2018	
Mailing Address 1250 Eye Street NW #1003		Amount 39916.67	
City Washington	State DC	Zip Code 20005	Transaction ID : F57.4358
Purpose of Expenditure Online Advertising	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: GROSSMAN, SETH, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify)	
		39916.67	

(a) SUBTOTAL of Itemized Independent Expenditures.....	94916.67
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
AFT Solidarity

Full Name (Last, First, Middle Initial) of Payee NP Consulting Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2018	
Mailing Address 1250 Eye Street NW #1003		Amount 39916.67	
City	State	Zip Code	Transaction ID : F57.4359
Washington	DC	20005	
Purpose of Expenditure Online Advertising	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 11
Name of Federal Candidate Supported or Opposed by Expenditure: WEBBER, JAY, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2018	
39916.67			

Full Name (Last, First, Middle Initial) of Payee NP Consulting Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2018	
Mailing Address 1250 Eye Street NW #1003		Amount 39916.66	
City	State	Zip Code	Transaction ID : F57.4360
Washington	DC	20005	
Purpose of Expenditure Online Advertising	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: MACARTHUR, THOMAS, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2018	
39916.66			

Full Name (Last, First, Middle Initial) of Payee Putnam Partners LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2018	
Mailing Address 1100 Vermont Ave NW #1200		Amount 844.04	
City	State	Zip Code	Transaction ID : F57.4361
Washington	DC	20005	
Purpose of Expenditure Ad Production	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 14
Name of Federal Candidate Supported or Opposed by Expenditure: HULTGREN, RANDY, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2018	
28344.04			

(a) SUBTOTAL of Itemized Independent Expenditures.....	80677.37
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
AFT Solidarity

Full Name (Last, First, Middle Initial) of Payee Putnam Partners LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2018	
Mailing Address 1100 Vermont Ave NW #1200		Amount 844.03	
City Washington	State DC	Zip Code 20005	Transaction ID : F57.4362
Purpose of Expenditure Ad Production	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 14
Name of Federal Candidate Supported or Opposed by Expenditure: UNDERWOOD, LAUREN A, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2018	
56688.07			

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		MM / DD / YYYY	
City	State	Zip Code	Amount
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2018	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		MM / DD / YYYY	
City	State	Zip Code	Amount
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		2018	

(a) SUBTOTAL of Itemized Independent Expenditures.....	844.03
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	176438.07