

# 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 <b>AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO</b>		3. FEC Identification Number <b>C</b> C90011172
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1625 L STREET NW		
(c) City, State and ZIP Code WASHINGTON DC 20036		
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  /  /

5. COVERING PERIOD: FROM  /  /  07 / 01 / 2018  
THROUGH  /  /  09 / 30 / 2018

6. TOTAL CONTRIBUTIONS.....  .00  
7. TOTAL INDEPENDENT EXPENDITURES .....  161088.79

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.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
WINGFIELD, CLAUDETTE, , ,	WINGFIELD, CLAUDETTE, , , <i>[Electronically Filed]</i>	10/15/2018

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)  
AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO

Full Name (Last, First, Middle Initial) of Payee WORKING AMERICA		Date of Public Distribution/Dissemination 08 / 23 / 2018	
Mailing Address 815 16TH STREET, NW		Amount 29919.88	
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : F57.000001
Purpose of Expenditure CANVASSING	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: CASEY, ROBERT P, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 54232.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee RESONANCE CAMPAIGNS		Date of Public Distribution/Dissemination 09 / 05 / 2018	
Mailing Address 1020 16TH STREET, NW SUITE 701		Amount 1600.00	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : F57.000002
Purpose of Expenditure WALK CARDS	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: ROSEN, JACKY, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 18383.62		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee WORKING AMERICA		Date of Public Distribution/Dissemination 09 / 05 / 2018	
Mailing Address 815 16TH STREET, NW		Amount 21500.00	
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : F57.000003
Purpose of Expenditure CANVASSING	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: CASEY, ROBERT P, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 54232.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	53019.88
(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)  
AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO

Full Name (Last, First, Middle Initial) of Payee WORKING AMERICA		Date of Public Distribution/Dissemination 09 / 05 / 2018	
Mailing Address 815 16TH STREET, NW		Amount 5555.00	
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : F57.000004
Purpose of Expenditure CANVASSING	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: NELSON, BILL, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 86390.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee RESONANCE CAMPAIGNS		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 1020 16TH STREET, NW SUITE 701		Amount 2307.36	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : F57.000005
Purpose of Expenditure WALK CARDS	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: NELSON, BILL, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 86390.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee RESONANCE CAMPAIGNS		Date of Public Distribution/Dissemination 09 / 19 / 2018	
Mailing Address 1020 16TH STREET, NW SUITE 701		Amount 7836.22	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : F57.000006
Purpose of Expenditure MAILING PIECES	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: ROSEN, JACKY, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 18383.62		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	15698.58
(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)  
AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO

Full Name (Last, First, Middle Initial) of Payee RESONANCE CAMPAIGNS		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 1020 16TH STREET, NW SUITE 701		Amount 9803.73	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : F57.000007
Purpose of Expenditure MAILING PIECES	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: NELSON, BILL, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 86390.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee IQM		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 315 WEST 36TH STREET APT 10TH FLOOR		Amount 17336.70	
City NEW YORK	State NY	Zip Code 10018	Transaction ID : F57.000008
Purpose of Expenditure DIGITAL ADS	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: NELSON, BILL, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 86390.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee IQM		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 315 WEST 36TH STREET APT 10TH FLOOR		Amount 6537.00	
City NEW YORK	State NY	Zip Code 10018	Transaction ID : F57.000009
Purpose of Expenditure DIGITAL ADS	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: ROSEN, JACKY, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 18383.62		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33677.43
(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)  
AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO

Full Name (Last, First, Middle Initial) of Payee GREG HAUENSTEIN		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 6016 SW 3RD STREET		Amount 1655.45	
City DES MOINES	State IA	Zip Code 50315	Transaction ID : F57.000010
Purpose of Expenditure DIGITAL ADS	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: CASEY, ROBERT P0, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 54232.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee DOYLE PRINTING & OFFSET CO.		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 5206 46TH AVENUE		Amount 231.40	
City HYATTSVILLE	State MD	Zip Code 20781	Transaction ID : F57.000011
Purpose of Expenditure PLACARDS	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: ROSEN, JACKY, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 18383.62		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee DOYLE PRINTING & OFFSET CO.		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 5206 46TH AVENUE		Amount 231.40	
City HYATTSVILLE	State MD	Zip Code 20781	Transaction ID : F57.000012
Purpose of Expenditure PLACARDS	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BROWN, SHERROD, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 231.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2118.25
(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)  
AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO

Full Name (Last, First, Middle Initial) of Payee DOYLE PRINTING & OFFSET CO.		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 5206 46TH AVENUE		Amount 462.79	
City HYATTSVILLE	State MD	Zip Code 20781	Transaction ID : F57.000013
Purpose of Expenditure PLACARDS	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: KLOBUCHAR, AMY, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 462.79		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee DOYLE PRINTING & OFFSET CO.		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 5206 46TH AVENUE		Amount 462.79	
City HYATTSVILLE	State MD	Zip Code 20781	Transaction ID : F57.000014
Purpose of Expenditure PLACARDS	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: SMITH, TINA FLINT, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 462.79		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee DOYLE PRINTING & OFFSET CO.		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 5206 46TH AVENUE		Amount 231.40	
City HYATTSVILLE	State MD	Zip Code 20781	Transaction ID : F57.000015
Purpose of Expenditure PLACARDS	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CT District: 05
Name of Federal Candidate Supported or Opposed by Expenditure: HAYES, JAHANA, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 231.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1156.98
(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)  
AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO

Full Name (Last, First, Middle Initial) of Payee DOYLE PRINTING & OFFSET CO.		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 5206 46TH AVENUE		Amount 231.40	
City HYATTSVILLE	State MD	Zip Code 20781	Transaction ID : F57.000016
Purpose of Expenditure PLACARDS	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BALDWIN, TAMMY, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 231.40		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee DOYLE PRINTING & OFFSET CO.		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 5206 46TH AVENUE		Amount 1156.98	
City HYATTSVILLE	State MD	Zip Code 20781	Transaction ID : F57.000017
Purpose of Expenditure PLACARDS	Category/Type 005	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: CASEY, BOB, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 54232.31		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee DOYLE PRINTING & OFFSET CO.		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 5206 46TH AVENUE		Amount 925.59	
City HYATTSVILLE	State MD	Zip Code 20781	Transaction ID : F57.000018
Purpose of Expenditure PLACARDS	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: NELSON, BILL, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 86390.28		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2313.97
(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)  
AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO

Full Name (Last, First, Middle Initial) of Payee DOYLE PRINTING & OFFSET CO.		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 5206 46TH AVENUE		Amount 231.40	
City HYATTSVILLE	State MD	Zip Code 20781	Transaction ID : F57.000019
Purpose of Expenditure PLACARDS	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: STABENOW, DEBBIE, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 231.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee DOYLE PRINTING & OFFSET CO.		Date of Public Distribution/Dissemination 09 / 20 / 2018	
Mailing Address 5206 46TH AVENUE		Amount 231.40	
City HYATTSVILLE	State MD	Zip Code 20781	Transaction ID : F57.000020
Purpose of Expenditure PLACARDS	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NM District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: HEINRICH, MARTIN TREVOR, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 231.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee WORKING AMERICA		Date of Public Distribution/Dissemination 09 / 24 / 2018	
Mailing Address 815 16TH STREET, NW		Amount 37809.00	
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : F57.000021
Purpose of Expenditure CANVASSING	Category/Type 006	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: NELSON, BILL, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 86390.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	38271.80
(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)  
AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO

Full Name (Last, First, Middle Initial) of Payee FACEBOOK ADVERTISING USA		Date of Public Distribution/Dissemination 09 / 24 / 2018	
Mailing Address 1601 WILLOW RD, BLDG 10		Amount 5778.90	
City MENLO PARK	State CA	Zip Code 94025	
Purpose of Expenditure DIGITAL ADS		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NELSON, BILL, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 86390.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.000022

Full Name (Last, First, Middle Initial) of Payee FACEBOOK ADVERTISING USA		Date of Public Distribution/Dissemination 09 / 24 / 2018	
Mailing Address 1601 WILLOW RD, BLDG 10		Amount 2179.00	
City MENLO PARK	State CA	Zip Code 94025	
Purpose of Expenditure DIGITAL ADS		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ROSEN, JACKY, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 18383.62		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.000023

Full Name (Last, First, Middle Initial) of Payee WORKING AMERICA		Date of Public Distribution/Dissemination 09 / 29 / 2018	
Mailing Address 815 16TH STREET, NW		Amount 6874.00	
City WASHINGTON	State DC	Zip Code 20006	
Purpose of Expenditure CANVASSING		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NELSON, BILL, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 86390.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : F57.000024

(a) SUBTOTAL of Itemized Independent Expenditures.....	14831.90
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	161088.79