

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

Working America Coalition

ADDRESS (number and street) 815 - 16th Street, NW 7th Floor

Check if different than previously reported. (ACC) Washington DC 20006

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00620583 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report

(b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) Election on in the State of

(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S) Election on in the State of

5. Covering Period 07 / 01 / 2016 through 09 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. King, Crystal, , ,

Type or Print Name of Treasurer Signature of Treasurer King, Crystal, , , [Electronically Filed] Date 10 / 27 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Working America Coalition

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="700003.84"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4631338.05"/>	<input type="text" value="5331341.89"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="5331341.89"/>	<input type="text" value="5331341.89"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4895393.12"/>	<input type="text" value="4895393.12"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="435948.77"/>	<input type="text" value="435948.77"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="262472.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Working America Coalition

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3946350.81	4646350.81
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3946350.81	4646350.81
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	684834.75	684834.75
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4631185.56	5331185.56
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	152.49	156.33
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	4631338.05	5331341.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4631338.05	5331341.89

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	4638379.75	4638379.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4638379.75	4638379.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	92250.00	92250.00
24. Independent Expenditures (use Schedule E)	142180.21	142180.21
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	22583.16	22583.16
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4895393.12	4895393.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4895393.12	4895393.12

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4631185.56	5331185.56
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4631185.56	5331185.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4638379.75	4638379.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4638379.75	4638379.75

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

The term ""Administrative"" in the memo entries associated with in-kind contributions of staff and in the purpose entries for corresponding disbursements is intended to encompass all services performed, whether or not strictly administrative in nature.

Form/Schedule:
Transaction ID:

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : C10571554

Amount of Each Receipt this Period

914.86

 Memo Item

* In-Kind: Inkind Administrative Staff

B. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : C10571555

Amount of Each Receipt this Period

44567.33

 Memo Item

* In-Kind: Inkind Administrative Staff

C. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : C10571556

Amount of Each Receipt this Period

78907.89

 Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	124390.08
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFL-CIO COPE Treasury
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 - 16th Street, NW
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3020505.56

Date of Receipt 08 / 22 / 2016
Transaction ID : C10571558
 Amount of Each Receipt this Period 100578.41
 Memo Item
 * In-Kind: Inkind Administrative Staff

B. AFL-CIO COPE Treasury
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 - 16th Street, NW
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3020505.56

Date of Receipt 08 / 29 / 2016
Transaction ID : C10571557
 Amount of Each Receipt this Period 90061.28
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. AFL-CIO COPE Treasury
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 - 16th Street, NW
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3020505.56

Date of Receipt 09 / 05 / 2016
Transaction ID : C10571559
 Amount of Each Receipt this Period 102676.91
 Memo Item
 * In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶ 293316.60
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 229
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016

Transaction ID : C10571560

Amount of Each Receipt this Period
 105163.00

Memo Item

* In-Kind: Inkind Administrative Staff

B. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016

Transaction ID : C10571561

Amount of Each Receipt this Period
 112451.29

Memo Item

* In-Kind: Inkind Administrative Staff

C. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : C10571562

Amount of Each Receipt this Period
 115802.62

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	333416.91
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 229
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt
 09 / 30 / 2016
Transaction ID : C10548921

Amount of Each Receipt this Period
 22342.50

Memo Item

* In-Kind: Data and Field Operations Services

B. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt
 09 / 30 / 2016
Transaction ID : C10562610

Amount of Each Receipt this Period
 592770.49

Memo Item

* In-Kind: Staff salaries & benefits

C. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt
 09 / 30 / 2016
Transaction ID : C10562612

Amount of Each Receipt this Period
 426107.66

Memo Item

* In-Kind: Staff salaries & benefits

SUBTOTAL of Receipts This Page (optional).....	1041220.65
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 229
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt
09 / 30 / 2016

Transaction ID : C10562613

Amount of Each Receipt this Period
86182.34

Memo Item

* In-Kind: Staff salaries & benefits

B. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt
09 / 30 / 2016

Transaction ID : C10562614

Amount of Each Receipt this Period
46220.46

Memo Item

* In-Kind: Travel cost

C. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt
09 / 30 / 2016

Transaction ID : C10562615

Amount of Each Receipt this Period
92940.30

Memo Item

* In-Kind: Staff salaries & benefits

SUBTOTAL of Receipts This Page (optional).....	225343.10
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 229
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : C10562617

Amount of Each Receipt this Period
56835.57

Memo Item

* In-Kind: Staff salaries & benefits

B. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : C10572255

Amount of Each Receipt this Period
54723.04

Memo Item

* In-Kind: Staff salaries & benefits

C. AFL-CIO COPE Treasury

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3020505.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : C10572256

Amount of Each Receipt this Period
59092.86

Memo Item

* In-Kind: Staff salaries & benefits

SUBTOTAL of Receipts This Page (optional).....	170651.47
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFL-CIO COPE Treasury
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 - 16th Street, NW
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3020505.56

Date of Receipt 09 / 30 / 2016
Transaction ID : C10572257
 Amount of Each Receipt this Period 60428.10
 Memo Item
 * In-Kind: Staff salaries & benefits

B. AFL-CIO COPE Treasury
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 - 16th Street, NW
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3020505.56

Date of Receipt 09 / 30 / 2016
Transaction ID : C10572258
 Amount of Each Receipt this Period 71738.65
 Memo Item
 * In-Kind: Travel cost

C. AFSCME Council 32 PEOPLE Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8033 Excelsior Drive
 City Madison State WI Zip Code 53717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5880.00

Date of Receipt 08 / 01 / 2016
Transaction ID : C10571637
 Amount of Each Receipt this Period 60.00
 Memo Item
 * In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶ 132226.75
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFSCME Council 32 PEOPLE Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8033 Excelsior Drive

City Madison	State WI	Zip Code 53717
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5880.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : C10571639

Amount of Each Receipt this Period
360.00

Memo Item

* In-Kind: Inkind Administrative Staff

B. AFSCME Council 32 PEOPLE Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8033 Excelsior Drive

City Madison	State WI	Zip Code 53717
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5880.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : C10571638

Amount of Each Receipt this Period
300.00

Memo Item

* In-Kind: Inkind Administrative Staff

C. AFSCME Council 32 PEOPLE Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8033 Excelsior Drive

City Madison	State WI	Zip Code 53717
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5880.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

Transaction ID : C10571640

Amount of Each Receipt this Period
540.00

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 229
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. AFSCME Council 32 PEOPLE Fund

Mailing Address 8033 Excelsior Drive

City Madison	State WI	Zip Code 53717
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5880.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : C10571641

Amount of Each Receipt this Period
900.00

Memo Item

* In-Kind: Inkind Administrative Staff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. AFSCME Council 32 PEOPLE Fund

Mailing Address 8033 Excelsior Drive

City Madison	State WI	Zip Code 53717
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5880.00

Date of Receipt
MM / DD / YYYY
09 / 05 / 2016

Transaction ID : C10571642

Amount of Each Receipt this Period
900.00

Memo Item

* In-Kind: Inkind Administrative Staff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. AFSCME Council 32 PEOPLE Fund

Mailing Address 8033 Excelsior Drive

City Madison	State WI	Zip Code 53717
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5880.00

Date of Receipt
MM / DD / YYYY
09 / 12 / 2016

Transaction ID : C10571645

Amount of Each Receipt this Period
1020.00

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	2820.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. AFSCME Council 32 PEOPLE Fund

Mailing Address 8033 Excelsior Drive

City Madison	State WI	Zip Code 53717
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5880.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : C10571643

Amount of Each Receipt this Period
900.00

Memo Item

* In-Kind: Inkind Administrative Staff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. AFSCME Council 32 PEOPLE Fund

Mailing Address 8033 Excelsior Drive

City Madison	State WI	Zip Code 53717
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5880.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : C10571644

Amount of Each Receipt this Period
900.00

Memo Item

* In-Kind: Inkind Administrative Staff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. AFSCME Florida Special Account

Mailing Address 1625 L Street, NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
96863.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

Transaction ID : C10571617

Amount of Each Receipt this Period
2147.96

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	3947.96
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. AFSCME Florida Special Account

Mailing Address 1625 L Street, NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
96863.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2016

Transaction ID : C10571618

Amount of Each Receipt this Period
5475.18

Memo Item

* In-Kind: Inkind Administrative Staff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. AFSCME Florida Special Account

Mailing Address 1625 L Street, NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
96863.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

Transaction ID : C10569724

Amount of Each Receipt this Period
7966.70

Memo Item

* In-Kind: In Kind Aug travel

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. AFSCME Florida Special Account

Mailing Address 1625 L Street, NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
96863.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2016

Transaction ID : C10571619

Amount of Each Receipt this Period
10529.64

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶	23971.52
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFSCME Florida Special Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 L Street, NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
96863.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : C10571622

Amount of Each Receipt this Period

15016.66

 Memo Item

* In-Kind: Inkind Administrative Staff

B. AFSCME Florida Special Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 L Street, NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
96863.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : C10571621

Amount of Each Receipt this Period

14698.12

 Memo Item

* In-Kind: Inkind Administrative Staff

C. AFSCME Florida Special Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 L Street, NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
96863.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : C10571620

Amount of Each Receipt this Period

12508.51

 Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶	42223.29
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFSCME Florida Special Account
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L Street, NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 96863.68

Date of Receipt 09 / 30 / 2016
Transaction ID : C10569719
 Amount of Each Receipt this Period 28520.91
 Memo Item
 * In-Kind: In Kind September travel

B. AFSCME Ohio PCE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L St NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 145630.17

Date of Receipt 08 / 22 / 2016
Transaction ID : C10571646
 Amount of Each Receipt this Period 1184.24
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. AFSCME Ohio PCE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L St NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 145630.17

Date of Receipt 08 / 29 / 2016
Transaction ID : C10571647
 Amount of Each Receipt this Period 6046.84
 Memo Item
 * In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶ 35751.99
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 229
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFSCME Ohio PCE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L St NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 145630.17

Date of Receipt **08 / 31 / 2016**
Transaction ID : C10569723
 Amount of Each Receipt this Period 6177.54
 Memo Item
 * In-Kind: In-kind Aug travel

B. AFSCME Ohio PCE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L St NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 145630.17

Date of Receipt **09 / 05 / 2016**
Transaction ID : C10571648
 Amount of Each Receipt this Period 12457.14
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. AFSCME Ohio PCE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L St NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 145630.17

Date of Receipt **09 / 12 / 2016**
Transaction ID : C10571651
 Amount of Each Receipt this Period 22309.42
 Memo Item
 * In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	40944.10
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFSCME Ohio PCE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L St NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 145630.17

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : C10571650
 Amount of Each Receipt this Period
 20958.12
 Memo Item
 * In-Kind: Inkind Administrative Staff

B. AFSCME Ohio PCE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L St NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 145630.17

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : C10571649
 Amount of Each Receipt this Period
 19853.06
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. AFSCME Ohio PCE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L St NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 145630.17

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : C10569721
 Amount of Each Receipt this Period
 56643.81
 Memo Item
 * In-Kind: In-kind Sept travel

SUBTOTAL of Receipts This Page (optional).....	97454.99
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFSCME Pennsylvania Special Account
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L St NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2114.48

Date of Receipt 09 / 19 / 2016
Transaction ID : C10571658
 Amount of Each Receipt this Period 457.98
 Memo Item
 * In-Kind: Inkind Administrative Staff

B. AFSCME Pennsylvania Special Account
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L St NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2114.48

Date of Receipt 09 / 26 / 2016
Transaction ID : C10571657
 Amount of Each Receipt this Period 228.99
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. AFSCME Pennsylvania Special Account
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L St NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2114.48

Date of Receipt 09 / 30 / 2016
Transaction ID : C10569722
 Amount of Each Receipt this Period 1427.51
 Memo Item
 * In-Kind: In-Kind Sept travel

SUBTOTAL of Receipts This Page (optional).....▶ 2114.48
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFSCME Special Account
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L Street, NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 37130.93

Date of Receipt 09 / 05 / 2016
Transaction ID : C10571563
 Amount of Each Receipt this Period 1891.35
 Memo Item
 * In-Kind: Inkind Administrative Staff

B. AFSCME Special Account
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L Street, NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 37130.93

Date of Receipt 09 / 12 / 2016
Transaction ID : C10571564
 Amount of Each Receipt this Period 5395.12
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. AFSCME Special Account
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 L Street, NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 37130.93

Date of Receipt 09 / 19 / 2016
Transaction ID : C10571565
 Amount of Each Receipt this Period 5647.44
 Memo Item
 * In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶ 12933.91
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFSCME Special Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 L Street, NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
37130.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : C10571566

Amount of Each Receipt this Period
5899.75

Memo Item

* In-Kind: Inkind Administrative Staff

B. AFSCME Special Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 L Street, NW

City Washington	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
37130.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : C10569720

Amount of Each Receipt this Period
18297.27

Memo Item

* In-Kind: In-Kind Sept travel

C. AFT Solidarity 527

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 555 New Jersey Ave. N.W.

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
417843.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : C10571569

Amount of Each Receipt this Period
27689.85

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	51886.87
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFT Solidarity 527

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 555 New Jersey Ave. N.W.

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
417843.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : C10571568

Amount of Each Receipt this Period
23883.61

Memo Item

* In-Kind: Inkind Administrative Staff

B. AFT Solidarity 527

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 555 New Jersey Ave. N.W.

City Washington	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
417843.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : C10571567

Amount of Each Receipt this Period
21280.32

Memo Item

* In-Kind: Inkind Administrative Staff

C. AFT Solidarity 527

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 555 New Jersey Ave. N.W.

City Washington	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
417843.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

Transaction ID : C10570198

Amount of Each Receipt this Period
6442.18

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	51606.11
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFT Solidarity 527
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 New Jersey Ave. N.W.
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **417843.18**

Date of Receipt **08 / 22 / 2016**
Transaction ID : C10571571
 Amount of Each Receipt this Period **29983.49**
 Memo Item
 * In-Kind: Inkind Administrative Staff

B. AFT Solidarity 527
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 New Jersey Ave. N.W.
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **417843.18**

Date of Receipt **08 / 29 / 2016**
Transaction ID : C10571570
 Amount of Each Receipt this Period **28629.69**
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. AFT Solidarity 527
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 New Jersey Ave. N.W.
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **417843.18**

Date of Receipt **09 / 05 / 2016**
Transaction ID : C10571572
 Amount of Each Receipt this Period **36597.40**
 Memo Item
 * In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional)..... **95210.58**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFT Solidarity 527

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 555 New Jersey Ave. N.W.

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
417843.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : C10571573

Amount of Each Receipt this Period
47224.55

Memo Item

* In-Kind: Inkind Administrative Staff

B. AFT Solidarity 527

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 555 New Jersey Ave. N.W.

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
417843.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : C10571574

Amount of Each Receipt this Period
80089.61

Memo Item

* In-Kind: Inkind Administrative Staff

C. AFT Solidarity 527

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 555 New Jersey Ave. N.W.

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
417843.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : C10571575

Amount of Each Receipt this Period
116022.48

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶	243336.64
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. American Postal Workers Union Separate Segregated Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1300 L Street, NW

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7411.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : C10571541

Amount of Each Receipt this Period
1709.25

Memo Item

* In-Kind: Inkind Administrative Staff

B. American Postal Workers Union Separate Segregated Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1300 L Street, NW

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7411.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : C10571542

Amount of Each Receipt this Period
5701.85

Memo Item

* In-Kind: Inkind Administrative Staff

C. Central Pennsylvania Area Labor Federation, AFL-CIO

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4031 Executive Park Drive

City Harrisburg	State PA	Zip Code 17111
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7746.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : C10571593

Amount of Each Receipt this Period
1921.60

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	9332.70
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Central Pennsylvania Area Labor Federation, AFL-CIO
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4031 Executive Park Drive
 City Harrisburg State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **7746.47**

Date of Receipt **09 / 19 / 2016**
Transaction ID : C10571594
 Amount of Each Receipt this Period **2658.59**
 Memo Item
 * In-Kind: Inkind Administrative Staff

B. Central Pennsylvania Area Labor Federation, AFL-CIO
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4031 Executive Park Drive
 City Harrisburg State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **7746.47**

Date of Receipt **09 / 26 / 2016**
Transaction ID : C10571595
 Amount of Each Receipt this Period **3166.28**
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. Florida AFL-CIO General Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address c/o Mike Williams
 135 S. Monroe Street
 City Tallahassee State FL Zip Code 32301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ **91356.14**

Date of Receipt **07 / 25 / 2016**
Transaction ID : C10571525
 Amount of Each Receipt this Period **1915.13**
 Memo Item
 * In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional)..... **7740.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Florida AFL-CIO General Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address c/o Mike Williams
 135 S. Monroe Street
 City Tallahassee State FL Zip Code 32301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 91356.14

Date of Receipt 08 / 01 / 2016
Transaction ID : C10571532
 Amount of Each Receipt this Period 12213.35
 Memo Item
 * In-Kind: Inkind Administrative Staff

B. Florida AFL-CIO General Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address c/o Mike Williams
 135 S. Monroe Street
 City Tallahassee State FL Zip Code 32301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 91356.14

Date of Receipt 08 / 08 / 2016
Transaction ID : C10571534
 Amount of Each Receipt this Period 12860.15
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. Florida AFL-CIO General Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address c/o Mike Williams
 135 S. Monroe Street
 City Tallahassee State FL Zip Code 32301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 91356.14

Date of Receipt 08 / 15 / 2016
Transaction ID : C10571533
 Amount of Each Receipt this Period 12303.32
 Memo Item
 * In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶ 37376.82
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Florida AFL-CIO General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address c/o Mike Williams
135 S. Monroe Street

City Tallahassee State FL Zip Code 32301

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
91356.14

Date of Receipt
MM / DD / YYYY
08 / 22 / 2016

Transaction ID : C10571531

Amount of Each Receipt this Period
11343.00

Memo Item

* In-Kind: Inkind Administrative Staff

B. Florida AFL-CIO General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address c/o Mike Williams
135 S. Monroe Street

City Tallahassee State FL Zip Code 32301

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
91356.14

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : C10571527

Amount of Each Receipt this Period
7698.78

Memo Item

* In-Kind: Inkind Administrative Staff

C. Florida AFL-CIO General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address c/o Mike Williams
135 S. Monroe Street

City Tallahassee State FL Zip Code 32301

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
91356.14

Date of Receipt
MM / DD / YYYY
09 / 05 / 2016

Transaction ID : C10571529

Amount of Each Receipt this Period
8342.08

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	27383.86
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Florida AFL-CIO General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address c/o Mike Williams
135 S. Monroe Street

City Tallahassee State FL Zip Code 32301

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
91356.14

Date of Receipt
09 / 12 / 2016

Transaction ID : C10571530

Amount of Each Receipt this Period
8695.41

Memo Item

* In-Kind: Inkind Administrative Staff

B. Florida AFL-CIO General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address c/o Mike Williams
135 S. Monroe Street

City Tallahassee State FL Zip Code 32301

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
91356.14

Date of Receipt
09 / 19 / 2016

Transaction ID : C10571528

Amount of Each Receipt this Period
8297.12

Memo Item

* In-Kind: Inkind Administrative Staff

C. Florida AFL-CIO General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address c/o Mike Williams
135 S. Monroe Street

City Tallahassee State FL Zip Code 32301

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
91356.14

Date of Receipt
09 / 26 / 2016

Transaction ID : C10571526

Amount of Each Receipt this Period
7687.80

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	24680.33
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Los Angeles County Federation of Labor, AFL-CIO Member Communications Account
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2130 W. James M. Wood Blvd.
 City Los Angeles State CA Zip Code 90006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12128.43

Date of Receipt 09 / 16 / 2016
Transaction ID : C10570197
 Amount of Each Receipt this Period 12128.43
 Memo Item
 * In-Kind: Field expenses

B. Nevada State AFL-CIO
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1891 Whitney Mesa Drive
 City Henderson State NV Zip Code 89014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6200.00

Date of Receipt 08 / 08 / 2016
Transaction ID : C10571602
 Amount of Each Receipt this Period 800.00
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. Nevada State AFL-CIO
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1891 Whitney Mesa Drive
 City Henderson State NV Zip Code 89014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 6200.00

Date of Receipt 08 / 15 / 2016
Transaction ID : C10571604
 Amount of Each Receipt this Period 2000.00
 Memo Item
 * In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶ 14928.43
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Nevada State AFL-CIO

Mailing Address 1891 Whitney Mesa Drive

City Henderson	State NV	Zip Code 89014
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

Transaction ID : C10571605

Amount of Each Receipt this Period
2000.00

Memo Item

* In-Kind: Inkind Administrative Staff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Nevada State AFL-CIO

Mailing Address 1891 Whitney Mesa Drive

City Henderson	State NV	Zip Code 89014
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : C10571603

Amount of Each Receipt this Period
1400.00

Memo Item

* In-Kind: Inkind Administrative Staff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. North Carolina State AFL-CIO

Mailing Address P. O. Box 10805

City Raleigh	State NC	Zip Code 27605
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9730.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : C10571814

Amount of Each Receipt this Period
759.08

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	4159.08
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 229
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Working America Coalition

A. North Carolina State AFL-CIO

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. Box 10805

City Raleigh	State NC	Zip Code 27605
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9730.07

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2016

Transaction ID : C10571815

Amount of Each Receipt this Period
 4377.23

Memo Item

* In-Kind: Inkind Administrative Staff

B. North Carolina State AFL-CIO

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. Box 10805

City Raleigh	State NC	Zip Code 27605
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9730.07

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016

Transaction ID : C10571816

Amount of Each Receipt this Period
 2451.05

Memo Item

* In-Kind: Inkind Administrative Staff

C. North Carolina State AFL-CIO

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. Box 10805

City Raleigh	State NC	Zip Code 27605
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9730.07

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016

Transaction ID : C10571818

Amount of Each Receipt this Period
 766.94

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	7595.22
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. North Carolina State AFL-CIO

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. Box 10805

City Raleigh	State NC	Zip Code 27605
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9730.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : C10571817

Amount of Each Receipt this Period

1375.77

 Memo Item

* In-Kind: Inkind Administrative Staff

B. Northwestern PA Area Labor Federation

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1276 Liberty Street

City Franklin	State PA	Zip Code 16323
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3186.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2016

Transaction ID : C10571633

Amount of Each Receipt this Period

531.00

 Memo Item

* In-Kind: Inkind Administrative Staff

C. Northwestern PA Area Labor Federation

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1276 Liberty Street

City Franklin	State PA	Zip Code 16323
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3186.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : C10571634

Amount of Each Receipt this Period

885.00

 Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	2791.77
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Northwestern PA Area Labor Federation
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1276 Liberty Street
 City Franklin State PA Zip Code 16323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3186.00

Date of Receipt 09 / 19 / 2016
Transaction ID : C10571635
 Amount of Each Receipt this Period 885.00
 Memo Item
 * In-Kind: Inkind Administrative Staff

B. Northwestern PA Area Labor Federation
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1276 Liberty Street
 City Franklin State PA Zip Code 16323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3186.00

Date of Receipt 09 / 26 / 2016
Transaction ID : C10571636
 Amount of Each Receipt this Period 885.00
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. Ohio AFL-CIO General Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address c/o Secretary Petee Talley
 395 E. Broad Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 99916.93

Date of Receipt 07 / 25 / 2016
Transaction ID : C10571516
 Amount of Each Receipt this Period 8307.70
 Memo Item
 * In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶ 10077.70
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Ohio AFL-CIO General Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address c/o Secretary Petee Talley
 395 E. Broad Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 99916.93

Date of Receipt 08 / 01 / 2016
Transaction ID : C10571521
 Amount of Each Receipt this Period 10817.49
 Memo Item
 * In-Kind: Inkind Administrative Staff

B. Ohio AFL-CIO General Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address c/o Secretary Petee Talley
 395 E. Broad Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 99916.93

Date of Receipt 08 / 08 / 2016
Transaction ID : C10571522
 Amount of Each Receipt this Period 10817.49
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. Ohio AFL-CIO General Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address c/o Secretary Petee Talley
 395 E. Broad Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 99916.93

Date of Receipt 08 / 15 / 2016
Transaction ID : C10571523
 Amount of Each Receipt this Period 10817.49
 Memo Item
 * In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶ 32452.47
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Ohio AFL-CIO General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
99916.93

Date of Receipt
MM / DD / YYYY
08 / 22 / 2016

Transaction ID : C10571524

Amount of Each Receipt this Period
11026.30

Memo Item

* In-Kind: Inkind Administrative Staff

B. Ohio AFL-CIO General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
99916.93

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : C10571520

Amount of Each Receipt this Period
10629.31

Memo Item

* In-Kind: Inkind Administrative Staff

C. Ohio AFL-CIO General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
99916.93

Date of Receipt
MM / DD / YYYY
09 / 05 / 2016

Transaction ID : C10571515

Amount of Each Receipt this Period
7641.72

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	29297.33
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Ohio AFL-CIO General Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address c/o Secretary Petee Talley
 395 E. Broad Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 99916.93

Date of Receipt 09 / 12 / 2016
Transaction ID : C10571518
 Amount of Each Receipt this Period 10191.05
 Memo Item
 * In-Kind: Inkind Administrative Staff

B. Ohio AFL-CIO General Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address c/o Secretary Petee Talley
 395 E. Broad Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 99916.93

Date of Receipt 09 / 19 / 2016
Transaction ID : C10571517
 Amount of Each Receipt this Period 9477.33
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. Ohio AFL-CIO General Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address c/o Secretary Petee Talley
 395 E. Broad Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 99916.93

Date of Receipt 09 / 26 / 2016
Transaction ID : C10571519
 Amount of Each Receipt this Period 10191.05
 Memo Item
 * In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶ 29859.43
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Philadelphia AFL-CIO Council General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address c/o Pat Eiding
22 S 22nd Street

City Philadelphia	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3855.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : C10570199

Amount of Each Receipt this Period

4	3	8	5	5	8	7
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3855.87

Memo Item

* In-Kind: Inkind Administrative staff

B. South Central Federation of Labor

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1602 South Park Street

City Madison	State WI	Zip Code 53715
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1280.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : C10571597

Amount of Each Receipt this Period

4	5	7	3	8
---	---	---	---	---

457.38

Memo Item

* In-Kind: Inkind Administrative Staff

C. South Central Federation of Labor

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1602 South Park Street

City Madison	State WI	Zip Code 53715
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1280.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : C10571598

Amount of Each Receipt this Period

4	5	7	3	8
---	---	---	---	---

457.38

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶	4770.63
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. South Central Federation of Labor

Mailing Address 1602 South Park Street

City Madison State WI Zip Code 53715

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1280.67

Date of Receipt
 09 / 26 / 2016
Transaction ID : C10571596

Amount of Each Receipt this Period
 365.91

Memo Item

* In-Kind: Inkind Administrative Staff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Southeastern Pennsylvania Area Labor Federation General Fund

Mailing Address 1000 Germantown Pike Road
 Building K5

City Plymouth Meeting State PA Zip Code 19462

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 14084.60

Date of Receipt
 07 / 25 / 2016
Transaction ID : C10571624

Amount of Each Receipt this Period
 1266.03

Memo Item

* In-Kind: Inkind Administrative Staff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Southeastern Pennsylvania Area Labor Federation General Fund

Mailing Address 1000 Germantown Pike Road
 Building K5

City Plymouth Meeting State PA Zip Code 19462

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 14084.60

Date of Receipt
 08 / 01 / 2016
Transaction ID : C10571625

Amount of Each Receipt this Period
 1582.54

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional)..... ▶ 3214.48

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Southeastern Pennsylvania Area Labor Federation General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14084.60

Date of Receipt
MM / DD / YYYY
08 / 08 / 2016

Transaction ID : C10571626

Amount of Each Receipt this Period
1582.54

Memo Item

* In-Kind: Inkind Administrative Staff

B. Southeastern Pennsylvania Area Labor Federation General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14084.60

Date of Receipt
MM / DD / YYYY
08 / 15 / 2016

Transaction ID : C10571623

Amount of Each Receipt this Period
158.25

Memo Item

* In-Kind: Inkind Administrative Staff

C. Southeastern Pennsylvania Area Labor Federation General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
14084.60

Date of Receipt
MM / DD / YYYY
08 / 22 / 2016

Transaction ID : C10571627

Amount of Each Receipt this Period
1582.54

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	3323.33
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Southeastern Pennsylvania Area Labor Federation General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14084.60

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2016

Transaction ID : C10571628

Amount of Each Receipt this Period
1582.54

Memo Item

* In-Kind: Inkind Administrative Staff

B. Southeastern Pennsylvania Area Labor Federation General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14084.60

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2016

Transaction ID : C10571629

Amount of Each Receipt this Period
1582.54

Memo Item

* In-Kind: Inkind Administrative Staff

C. Southeastern Pennsylvania Area Labor Federation General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
14084.60

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2016

Transaction ID : C10571630

Amount of Each Receipt this Period
1582.54

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional)..... ▶ 4747.62

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Southeastern Pennsylvania Area Labor Federation General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14084.60

Date of Receipt
09 / 19 / 2016
Transaction ID : C10571631

Amount of Each Receipt this Period
1582.54

Memo Item

* In-Kind: Inkind Administrative Staff

B. Southeastern Pennsylvania Area Labor Federation General Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14084.60

Date of Receipt
09 / 26 / 2016
Transaction ID : C10571632

Amount of Each Receipt this Period
1582.54

Memo Item

* In-Kind: Inkind Administrative Staff

C. Transportation Trades Department, AFL-CIO Political Education Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4047.50

Date of Receipt
09 / 12 / 2016
Transaction ID : C10571576

Amount of Each Receipt this Period
1256.12

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	4421.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Transportation Trades Department, AFL-CIO Political Education Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 - 16th Street, NW
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4047.50

Date of Receipt 09 / 19 / 2016
Transaction ID : C10571577
 Amount of Each Receipt this Period 1395.69
 Memo Item
 * In-Kind: Inkind Administrative Staff

B. Transportation Trades Department, AFL-CIO Political Education Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 - 16th Street, NW
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4047.50

Date of Receipt 09 / 26 / 2016
Transaction ID : C10571578
 Amount of Each Receipt this Period 1395.69
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. UFCW Local 1208
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 69
 City Tar Heel State NC Zip Code 28392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 690.24

Date of Receipt 09 / 12 / 2016
Transaction ID : C10571659
 Amount of Each Receipt this Period 126.15
 Memo Item
 * In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶ 2917.53
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. UFCW Local 1208
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 69
 City Tar Heel State NC Zip Code 28392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **690.24**

Date of Receipt **09 / 19 / 2016**
Transaction ID : C10571661
 Amount of Each Receipt this Period **377.86**
 Memo Item
 * In-Kind: Inkind Administrative Staff

B. UFCW Local 1208
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 69
 City Tar Heel State NC Zip Code 28392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **690.24**

Date of Receipt **09 / 26 / 2016**
Transaction ID : C10571660
 Amount of Each Receipt this Period **186.23**
 Memo Item
 * In-Kind: Inkind Administrative Staff

C. UNITE HERE TIP STATE & LOCAL FUND
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 275 7TH AVENUE, 16TH FLOOR
 City New York State NY Zip Code 10001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ **616666.95**

Date of Receipt **08 / 22 / 2016**
Transaction ID : C10571537
 Amount of Each Receipt this Period **673.08**
 Memo Item
 * In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional)..... **1237.17**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. UNITE HERE TIP STATE & LOCAL FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 275 7TH AVENUE, 16TH FLOOR

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
616666.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2016

Transaction ID : C10571536

Amount of Each Receipt this Period
637.49

Memo Item

* In-Kind: Inkind Administrative Staff

B. UNITE HERE TIP STATE & LOCAL FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 275 7TH AVENUE, 16TH FLOOR

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
616666.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : C10571538

Amount of Each Receipt this Period
117163.66

Memo Item

* In-Kind: Inkind Administrative Staff

C. UNITE HERE TIP STATE & LOCAL FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 275 7TH AVENUE, 16TH FLOOR

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
616666.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : C10571540

Amount of Each Receipt this Period
134221.44

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	252022.59
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. UNITE HERE TIP STATE & LOCAL FUND

Mailing Address 275 7TH AVENUE, 16TH FLOOR

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
616666.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : C10571539

Amount of Each Receipt this Period
130855.67

Memo Item

* In-Kind: Inkind Administrative Staff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. UNITE HERE TIP STATE & LOCAL FUND

Mailing Address 275 7TH AVENUE, 16TH FLOOR

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
616666.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2016

Transaction ID : C10570200

Amount of Each Receipt this Period
233115.61

Memo Item

* In-Kind: In Kind Staff travel in NV

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. WI State AFL-CIO: New Alliance

Mailing Address 6333 West Bluemound Road

City Milwaukee	State WI	Zip Code 53213
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
42081.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	18	/	2016

Transaction ID : C10571606

Amount of Each Receipt this Period
464.00

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	364435.28
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 OF 229 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. WI State AFL-CIO: New Alliance

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6333 West Bluemound Road

City Milwaukee	State WI	Zip Code 53213
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
42081.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : C10571607

Amount of Each Receipt this Period
951.08

Memo Item

* In-Kind: Inkind Administrative Staff

B. WI State AFL-CIO: New Alliance

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6333 West Bluemound Road

City Milwaukee	State WI	Zip Code 53213
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
42081.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : C10571611

Amount of Each Receipt this Period
4570.15

Memo Item

* In-Kind: Inkind Administrative Staff

C. WI State AFL-CIO: New Alliance

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6333 West Bluemound Road

City Milwaukee	State WI	Zip Code 53213
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
42081.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : C10571608

Amount of Each Receipt this Period
3526.15

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....▶	9047.38
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 229
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. WI State AFL-CIO: New Alliance

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6333 West Bluemound Road

City Milwaukee	State WI	Zip Code 53213
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
42081.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : C10571612

Amount of Each Receipt this Period
4651.54

Memo Item

* In-Kind: Inkind Administrative Staff

B. WI State AFL-CIO: New Alliance

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6333 West Bluemound Road

City Milwaukee	State WI	Zip Code 53213
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
42081.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

Transaction ID : C10571610

Amount of Each Receipt this Period
4524.00

Memo Item

* In-Kind: Inkind Administrative Staff

C. WI State AFL-CIO: New Alliance

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6333 West Bluemound Road

City Milwaukee	State WI	Zip Code 53213
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
42081.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : C10571609

Amount of Each Receipt this Period
4431.08

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	13606.62
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 229
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. WI State AFL-CIO: New Alliance

Mailing Address 6333 West Bluemound Road

City Milwaukee	State WI	Zip Code 53213
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
42081.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2016

Transaction ID : C10571614

Amount of Each Receipt this Period
4732.31

Memo Item

* In-Kind: Inkind Administrative Staff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. WI State AFL-CIO: New Alliance

Mailing Address 6333 West Bluemound Road

City Milwaukee	State WI	Zip Code 53213
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
42081.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : C10571613

Amount of Each Receipt this Period
4720.77

Memo Item

* In-Kind: Inkind Administrative Staff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. WI State AFL-CIO: New Alliance

Mailing Address 6333 West Bluemound Road

City Milwaukee	State WI	Zip Code 53213
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
42081.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : C10571615

Amount of Each Receipt this Period
4755.38

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	14208.46
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. WI State AFL-CIO: New Alliance
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6333 West Bluemound Road
 City Milwaukee State WI Zip Code 53213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 42081.84

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : C10571616
 Amount of Each Receipt this Period
 4755.38
 Memo Item
 * In-Kind: Inkind Administrative Staff

B.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	4755.38
TOTAL This Period (last page this line number only).....▶	3946350.81

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 54 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20025.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : C10571580

Amount of Each Receipt this Period
942.38

Memo Item

* In-Kind: Inkind Administrative Staff

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20025.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : C10571582

Amount of Each Receipt this Period
2355.96

Memo Item

* In-Kind: Inkind Administrative Staff

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20025.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : C10571583

Amount of Each Receipt this Period
2355.96

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	5654.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20025.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2016

Transaction ID : C10571584

Amount of Each Receipt this Period
2355.96

Memo Item

* In-Kind: Inkind Administrative Staff

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20025.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	22	/	2016

Transaction ID : C10571579

Amount of Each Receipt this Period
471.19

Memo Item

* In-Kind: Inkind Administrative Staff

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20025.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2016

Transaction ID : C10571585

Amount of Each Receipt this Period
2355.96

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	5183.11
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20025.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2016

Transaction ID : C10571586

Amount of Each Receipt this Period

2355.96

 Memo Item

* In-Kind: Inkind Administrative Staff

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20025.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : C10571581

Amount of Each Receipt this Period

2120.36

 Memo Item

* In-Kind: Inkind Administrative Staff

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20025.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : C10571587

Amount of Each Receipt this Period

2355.96

 Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	6832.28
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 57 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20025.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : C10571588

Amount of Each Receipt this Period
2355.96

Memo Item

* In-Kind: Inkind Administrative Staff

B. ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1125 17TH ST, NW

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7584.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2016

Transaction ID : C10571599

Amount of Each Receipt this Period
2528.12

Memo Item

* In-Kind: Inkind Administrative Staff

C. ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1125 17TH ST, NW

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7584.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2016

Transaction ID : C10571600

Amount of Each Receipt this Period
2528.12

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	7412.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 58 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST, NW

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7584.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : C10571601

Amount of Each Receipt this Period
2528.12

Memo Item

* In-Kind: Inkind Administrative Staff

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
For Our Future

Mailing Address 888 16th St NW

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00620971

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110680.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2016

Transaction ID : C10572286

Amount of Each Receipt this Period
110680.01

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
International Union of Painters and Allied Trades Political Action Together Political Comm

Mailing Address 1750 New York Avenue, NW

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
272.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : C10571535

Amount of Each Receipt this Period
272.03

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	113480.16
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 59 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. LETTER CARRIER POLITICAL FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210216.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2016

Transaction ID : C10571511

Amount of Each Receipt this Period
24370.78

Memo Item

* In-Kind: Inkind Administrative Staff

B. LETTER CARRIER POLITICAL FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210216.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : C10571512

Amount of Each Receipt this Period
60104.63

Memo Item

* In-Kind: Inkind Administrative Staff

C. LETTER CARRIER POLITICAL FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210216.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : C10571513

Amount of Each Receipt this Period
60852.20

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	145327.61
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 60 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. LETTER CARRIER POLITICAL FUND

Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210216.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : C10571514

Amount of Each Receipt this Period
64889.08

Memo Item

* In-Kind: Inkind Administrative Staff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. National Treasury Employees Union Advocacy Cmtee

Mailing Address 1750 H Street NW

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00623355

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
927.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : C10571662

Amount of Each Receipt this Period
927.34

Memo Item

* In-Kind: Inkind Administrative Staff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. UFCW Int'l Union Working Families Advocacy Project

Mailing Address 1775 K Street, NW

City Washington	State DC	Zip Code 20006-1598
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00484253

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
96533.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2016

Transaction ID : C10571589

Amount of Each Receipt this Period
4635.51

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	70451.93
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 61 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. UFCW Int'l Union Working Families Advocacy Project

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1775 K Street, NW

City Washington	State DC	Zip Code 20006-1598
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00484253

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
96533.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : C10571590

Amount of Each Receipt this Period

25960.83

 Memo Item

* In-Kind: Inkind Administrative Staff

B. UFCW Int'l Union Working Families Advocacy Project

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1775 K Street, NW

City Washington	State DC	Zip Code 20006-1598
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00484253

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
96533.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : C10571591

Amount of Each Receipt this Period

30736.63

 Memo Item

* In-Kind: Inkind Administrative Staff

C. UFCW Int'l Union Working Families Advocacy Project

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1775 K Street, NW

City Washington	State DC	Zip Code 20006-1598
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00484253

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
96533.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : C10571592

Amount of Each Receipt this Period

35200.08

 Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	91897.54
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 62 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 80 F STREET NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00512293

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238595.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : C10571543

Amount of Each Receipt this Period
4763.04

Memo Item

* In-Kind: Inkind Administrative Staff

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 80 F STREET NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00512293

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238595.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : C10571544

Amount of Each Receipt this Period
10515.64

Memo Item

* In-Kind: Inkind Administrative Staff

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 80 F STREET NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00512293

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
238595.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : C10571546

Amount of Each Receipt this Period
12457.76

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	27736.44
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 63 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 80 F STREET NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00512293

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238595.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : C10571547

Amount of Each Receipt this Period
13548.44

Memo Item

* In-Kind: Inkind Administrative Staff

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 80 F STREET NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00512293

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238595.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : C10571545

Amount of Each Receipt this Period
12174.88

Memo Item

* In-Kind: Inkind Administrative Staff

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 80 F STREET NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00512293

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
238595.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

Transaction ID : C10571548

Amount of Each Receipt this Period
20344.18

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	46067.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 64 OF 229
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 80 F STREET NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00512293

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238595.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2016

Transaction ID : C10571549

Amount of Each Receipt this Period
21755.35

Memo Item

* In-Kind: Inkind Administrative Staff

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 80 F STREET NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00512293

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238595.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2016

Transaction ID : C10571550

Amount of Each Receipt this Period
30841.54

Memo Item

* In-Kind: Inkind Administrative Staff

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 80 F STREET NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00512293

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
238595.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2016

Transaction ID : C10571551

Amount of Each Receipt this Period
32493.96

Memo Item

* In-Kind: Inkind Administrative Staff

SUBTOTAL of Receipts This Page (optional).....	85090.85
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 65 OF 229
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 F STREET NW
 City WASHINGTON State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C** C00512293
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 238595.62

Date of Receipt 09 / 19 / 2016
Transaction ID : C10571552
 Amount of Each Receipt this Period 34323.42
 Memo Item
 * In-Kind: Inkind Administrative Staff

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 F STREET NW
 City WASHINGTON State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C** C00512293
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 238595.62

Date of Receipt 09 / 26 / 2016
Transaction ID : C10571553
 Amount of Each Receipt this Period 45377.41
 Memo Item
 * In-Kind: Inkind Administrative Staff

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	79700.83
TOTAL This Period (last page this line number only).....▶	684834.75

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C Transaction ID : D599714 Amount of Each Disbursement this Period 22342.50 * In-Kind Received <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Data and Field Operations Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C Transaction ID : D601230 Amount of Each Disbursement this Period 592770.49 * In-Kind Received <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Staff salaries & benefits	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C Transaction ID : D601231 Amount of Each Disbursement this Period 426107.66 * In-Kind Received <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Staff salaries & benefits	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)..... ▶

1041220.65

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C Transaction ID : D601232 Amount of Each Disbursement this Period 86182.34 * In-Kind Received <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Staff salaries & benefits	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C Transaction ID : D601233 Amount of Each Disbursement this Period 46220.46 * In-Kind Received <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Travel cost	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C Transaction ID : D601234 Amount of Each Disbursement this Period 92940.30 * In-Kind Received <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Staff salaries & benefits	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	225343.10
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C Transaction ID : D601235 Amount of Each Disbursement this Period 56835.57 * In-Kind Received <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Staff salaries & benefits	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 08 / 29 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C Transaction ID : D601855 Amount of Each Disbursement this Period 88814.84 * In-Kind <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Administrative Inkind Staff	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 08 / 01 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C Transaction ID : D601856 Amount of Each Disbursement this Period 914.86 * In-Kind <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Administrative Inkind Staff	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	146565.27
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 05 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C [REDACTED] Transaction ID : D601857 Amount of Each Disbursement this Period 99402.43
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Administrative Inkind Staff		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 08 / 15 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C [REDACTED] Transaction ID : D601858 Amount of Each Disbursement this Period 76513.29
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Administrative Inkind Staff		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 26 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C [REDACTED] Transaction ID : D601859 Amount of Each Disbursement this Period 115802.62
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Administrative Inkind Staff		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

291718.34
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 08 / 22 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C Transaction ID : D601860 Amount of Each Disbursement this Period 98099.83 * In-Kind <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Administrative Inkind Staff	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 08 / 08 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C Transaction ID : D601861 Amount of Each Disbursement this Period 44567.33 * In-Kind <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Administrative Inkind Staff	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 19 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C Transaction ID : D601862 Amount of Each Disbursement this Period 111860.43 * In-Kind <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Administrative Inkind Staff	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional)..... ▶

254527.59

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 12 / 2016	
Mailing Address 815 - 16th Street, NW		FEC Identification Number C [] Transaction ID : D601863 Amount of Each Disbursement this Period [] 104106.62 * In-Kind <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20006	Category/Type 001
Purpose of Disbursement Administrative Inkind Staff		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016	
Mailing Address 815 - 16th Street, NW		FEC Identification Number C [] Transaction ID : D602347 Amount of Each Disbursement this Period [] 54723.04 * In-Kind Received <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20006	Category/Type []
Purpose of Disbursement Staff salaries & benefits		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016	
Mailing Address 815 - 16th Street, NW		FEC Identification Number C [] Transaction ID : D602348 Amount of Each Disbursement this Period [] 59092.86 * In-Kind Received <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20006	Category/Type []
Purpose of Disbursement Staff salaries & benefits		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 217922.52
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C [] Transaction ID : D602349 Amount of Each Disbursement this Period [] 60428.10 * In-Kind Received <input type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Staff salaries & benefits		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C [] Transaction ID : D602350 Amount of Each Disbursement this Period [] 71738.65 * In-Kind Received <input type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Travel cost		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. AFL-CIO COPE Treasury		Date of Disbursement MM / DD / YYYY 08 / 01 / 2016
Mailing Address 815 - 16th Street, NW		FEC Identification Number C [] Transaction ID : D602521 Amount of Each Disbursement this Period [] 11041.34 * In-Kind <input type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

[] 143208.09

TOTAL This Period (last page this line number only)..... ▶

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. AFL-CIO

Mailing Address 815 16th Street NW

City Washington State DC Zip Code 20006-4101

Purpose of Disbursement
Reimbursement for Office Supplies

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

C
Transaction ID : D602244
Amount of Each Disbursement this Period
14185.34

Memo Item

Full Name (Last, First, Middle Initial)

B. AFSCME Council 32 PEOPLE Fund

Mailing Address 8033 Excelsior Drive

City Madison State WI Zip Code 53717

Purpose of Disbursement
Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

C
Transaction ID : D601938
Amount of Each Disbursement this Period
900.00
* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. AFSCME Council 32 PEOPLE Fund

Mailing Address 8033 Excelsior Drive

City Madison State WI Zip Code 53717

Purpose of Disbursement
Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2016

FEC Identification Number

C
Transaction ID : D601939
Amount of Each Disbursement this Period
360.00
* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15445.34

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. AFSCME Council 32 PEOPLE Fund		Date of Disbursement MM / DD / YYYY 08 / 22 / 2016
Mailing Address 8033 Excelsior Drive		FEC Identification Number C [] Transaction ID : D601940 Amount of Each Disbursement this Period [] 340.00 * In-Kind <input type="checkbox"/> Memo Item
City Madison	State WI	Zip Code 53717
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. AFSCME Council 32 PEOPLE Fund		Date of Disbursement MM / DD / YYYY 09 / 19 / 2016
Mailing Address 8033 Excelsior Drive		FEC Identification Number C [] Transaction ID : D601941 Amount of Each Disbursement this Period [] 870.00 * In-Kind <input type="checkbox"/> Memo Item
City Madison	State WI	Zip Code 53717
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. AFSCME Council 32 PEOPLE Fund		Date of Disbursement MM / DD / YYYY 08 / 01 / 2016
Mailing Address 8033 Excelsior Drive		FEC Identification Number C [] Transaction ID : D601942 Amount of Each Disbursement this Period [] 60.00 * In-Kind <input type="checkbox"/> Memo Item
City Madison	State WI	Zip Code 53717
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1270.00
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. AFSCME Council 32 PEOPLE Fund			Date of Disbursement MM / DD / YYYY 09 / 05 / 2016	
Mailing Address 8033 Excelsior Drive			FEC Identification Number C	
City Madison	State WI	Zip Code 53717	Transaction ID : D601943	
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001	Amount of Each Disbursement this Period 660.00	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		* In-Kind	
State: District:				

Full Name (Last, First, Middle Initial) B. AFSCME Council 32 PEOPLE Fund			Date of Disbursement MM / DD / YYYY 09 / 12 / 2016	
Mailing Address 8033 Excelsior Drive			FEC Identification Number C	
City Madison	State WI	Zip Code 53717	Transaction ID : D601944	
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001	Amount of Each Disbursement this Period 825.00	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		* In-Kind	
State: District:				

Full Name (Last, First, Middle Initial) C. AFSCME Council 32 PEOPLE Fund			Date of Disbursement MM / DD / YYYY 08 / 29 / 2016	
Mailing Address 8033 Excelsior Drive			FEC Identification Number C	
City Madison	State WI	Zip Code 53717	Transaction ID : D601945	
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001	Amount of Each Disbursement this Period 580.00	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		* In-Kind	
State: District:				

SUBTOTAL of Disbursements This Page (optional)..... ▶

2065.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. AFSCME Council 32 PEOPLE Fund		Date of Disbursement MM / DD / YYYY 08 / 01 / 2016
Mailing Address 8033 Excelsior Drive		FEC Identification Number C [] Transaction ID : D602520 Amount of Each Disbursement this Period [] 1285.00 * In-Kind <input type="checkbox"/> Memo Item
City Madison	State WI	Zip Code 53717
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. AFSCME Florida Special Account		Date of Disbursement MM / DD / YYYY 08 / 22 / 2016
Mailing Address 1625 L Street, NW		FEC Identification Number C [] Transaction ID : D602519 Amount of Each Disbursement this Period [] 8592.18 * In-Kind <input type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. AFSCME Florida Special Account		Date of Disbursement MM / DD / YYYY 09 / 12 / 2016
Mailing Address 1625 L Street, NW		FEC Identification Number C [] Transaction ID : D601918 Amount of Each Disbursement this Period [] 11611.12 * In-Kind <input type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 21488.30
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFSCME Florida Special Account

Full Name (Last, First, Middle Initial)

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 19 / 2016

FEC Identification Number
C
Transaction ID : D601919
Amount of Each Disbursement this Period
13020.68

Memo Item * In-Kind

B. AFSCME Florida Special Account

Full Name (Last, First, Middle Initial)

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 22 / 2016

FEC Identification Number
C
Transaction ID : D601920
Amount of Each Disbursement this Period
2147.96

Memo Item * In-Kind

C. AFSCME Florida Special Account

Full Name (Last, First, Middle Initial)

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number
C
Transaction ID : D601921
Amount of Each Disbursement this Period
12508.51

Memo Item * In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

27677.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFSCME Florida Special Account

Full Name (Last, First, Middle Initial)

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 05 / 2016

FEC Identification Number: C

Transaction ID : D601922

Amount of Each Disbursement this Period: 7441.60

Memo Item * In-Kind

B. AFSCME Florida Special Account

Full Name (Last, First, Middle Initial)

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 29 / 2016

FEC Identification Number: C

Transaction ID : D601923

Amount of Each Disbursement this Period: 5054.02

Memo Item * In-Kind

C. AFSCME Florida Special Account

Full Name (Last, First, Middle Initial)

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement In Kind September travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2016

FEC Identification Number: C

Transaction ID : D601769

Amount of Each Disbursement this Period: 28520.91

Memo Item * In-Kind Received

SUBTOTAL of Disbursements This Page (optional)..... ▶ 41016.53

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. AFSCME Florida Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
In Kind Aug travel

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2016

FEC Identification Number

C
Transaction ID : D601770
Amount of Each Disbursement this Period
7966.70
* In-Kind Received

Memo Item

Full Name (Last, First, Middle Initial)

B. AFSCME Ohio PCE

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
In-kind Sept travel

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : D601772
Amount of Each Disbursement this Period
56643.81
* In-Kind Received

Memo Item

Full Name (Last, First, Middle Initial)

C. AFSCME Ohio PCE

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
In-kind Aug travel

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2016

FEC Identification Number

C
Transaction ID : D601773
Amount of Each Disbursement this Period
6177.54
* In-Kind Received

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

70788.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. AFSCME Ohio PCE		Date of Disbursement MM / DD / YYYY 08 / 29 / 2016	
Mailing Address 1625 L St NW		FEC Identification Number C [REDACTED] Transaction ID : D601946 Amount of Each Disbursement this Period 6046.84	
City Washington	State DC	Zip Code 20036	Category/Type 001
Purpose of Disbursement Administrative Inkind Staff		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item * In-Kind		

Full Name (Last, First, Middle Initial) B. AFSCME Ohio PCE		Date of Disbursement MM / DD / YYYY 09 / 12 / 2016	
Mailing Address 1625 L St NW		FEC Identification Number C [REDACTED] Transaction ID : D601947 Amount of Each Disbursement this Period 22309.42	
City Washington	State DC	Zip Code 20036	Category/Type 001
Purpose of Disbursement Administrative Inkind Staff		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item * In-Kind		

Full Name (Last, First, Middle Initial) C. AFSCME Ohio PCE		Date of Disbursement MM / DD / YYYY 09 / 19 / 2016	
Mailing Address 1625 L St NW		FEC Identification Number C [REDACTED] Transaction ID : D601948 Amount of Each Disbursement this Period 20958.12	
City Washington	State DC	Zip Code 20036	Category/Type 001
Purpose of Disbursement Administrative Inkind Staff		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item * In-Kind		

SUBTOTAL of Disbursements This Page (optional).....▶	49314.38
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. AFSCME Ohio PCE		Date of Disbursement MM / DD / YYYY 09 / 26 / 2016	
Mailing Address 1625 L St NW		FEC Identification Number C [] Transaction ID : D601949 Amount of Each Disbursement this Period [] 19853.06 * In-Kind <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20036	Category/Type 001
Purpose of Disbursement Administrative Inkind Staff		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. AFSCME Ohio PCE		Date of Disbursement MM / DD / YYYY 08 / 22 / 2016	
Mailing Address 1625 L St NW		FEC Identification Number C [] Transaction ID : D601950 Amount of Each Disbursement this Period [] 1184.24 * In-Kind <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20036	Category/Type 001
Purpose of Disbursement Administrative Inkind Staff		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. AFSCME Ohio PCE		Date of Disbursement MM / DD / YYYY 09 / 05 / 2016	
Mailing Address 1625 L St NW		FEC Identification Number C [] Transaction ID : D601951 Amount of Each Disbursement this Period [] 12457.14 * In-Kind <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20036	Category/Type 001
Purpose of Disbursement Administrative Inkind Staff		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 33494.44
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. AFSCME Pennsylvania Special Account

Full Name (Last, First, Middle Initial)

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036

Purpose of Disbursement Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 19 / 2016

FEC Identification Number: C

Transaction ID : D601957

Amount of Each Disbursement this Period: 457.98

Memo Item * In-Kind

B. AFSCME Pennsylvania Special Account

Full Name (Last, First, Middle Initial)

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036

Purpose of Disbursement Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 26 / 2016

FEC Identification Number: C

Transaction ID : D601958

Amount of Each Disbursement this Period: 228.99

Memo Item * In-Kind

C. AFSCME Pennsylvania Special Account

Full Name (Last, First, Middle Initial)

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036

Purpose of Disbursement In-Kind Sept travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2016

FEC Identification Number: C

Transaction ID : D601774

Amount of Each Disbursement this Period: 1427.51

Memo Item * In-Kind Received

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2114.48

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
In-Kind Sept travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : D601771
Amount of Each Disbursement this Period
18297.27
* In-Kind Received

Memo Item

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2016

FEC Identification Number

C
Transaction ID : D601864
Amount of Each Disbursement this Period
1891.35
* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

C
Transaction ID : D601865
Amount of Each Disbursement this Period
5899.75
* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

26088.37

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	1	6

FEC Identification Number

C

Transaction ID : D601866

Amount of Each Disbursement this Period

5395.12

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	6

FEC Identification Number

C

Transaction ID : D601867

Amount of Each Disbursement this Period

5647.44

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	1	6

FEC Identification Number

C

Transaction ID : D601868

Amount of Each Disbursement this Period

36158.84

* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

47201.40

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 08 / 2016

FEC Identification Number

C
Transaction ID : D601869
Amount of Each Disbursement this Period
 23883.61

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

B. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2016

FEC Identification Number

C
Transaction ID : D601870
Amount of Each Disbursement this Period
 116022.48

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

C. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 22 / 2016

FEC Identification Number

C
Transaction ID : D601871
Amount of Each Disbursement this Period
 29748.11

Memo Item * In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

169654.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

FEC Identification Number

C
Transaction ID : D601872
Amount of Each Disbursement this Period
 79561.07

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

B. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 15 / 2016

FEC Identification Number

C
Transaction ID : D601873
Amount of Each Disbursement this Period
 21280.32

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

C. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 29 / 2016

FEC Identification Number

C
Transaction ID : D601874
Amount of Each Disbursement this Period
 28158.93

Memo Item * In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

129000.32

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement Administrative Inkind Staff

001
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 01 / 2016

FEC Identification Number
C
Transaction ID : **D601875**
Amount of Each Disbursement this Period
27689.85

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

B. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement Administrative Inkind Staff

001
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 12 / 2016

FEC Identification Number
C
Transaction ID : **D601876**
Amount of Each Disbursement this Period
46173.85

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

C. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement Administrative Inkind Staff

001
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 01 / 2016

FEC Identification Number
C
Transaction ID : **D602518**
Amount of Each Disbursement this Period
2723.94

Memo Item * In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

76587.64

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Inkind Administrative Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 22 / 2016

FEC Identification Number

C
Transaction ID : D602004
Amount of Each Disbursement this Period
6442.18

Memo Item * In-Kind Received

Full Name (Last, First, Middle Initial)

B. American Postal Workers Union Separate Segregated Account

Mailing Address 1300 L Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

001
Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

C
Transaction ID : D601842
Amount of Each Disbursement this Period
5701.85

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

C. American Postal Workers Union Separate Segregated Account

Mailing Address 1300 L Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2016

FEC Identification Number

C
Transaction ID : D601843
Amount of Each Disbursement this Period
1709.25

Memo Item * In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

13853.28

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)
A. Central Pennsylvania Area Labor Federation, AFL-CIO

Mailing Address 4031 Executive Park Drive

City Harrisburg State PA Zip Code 17111

Purpose of Disbursement Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type: **001**

Date of Disbursement: 09 / 12 / 2016

FEC Identification Number: **C**

Transaction ID : **D601894**

Amount of Each Disbursement this Period: 1921.60

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)
B. Central Pennsylvania Area Labor Federation, AFL-CIO

Mailing Address 4031 Executive Park Drive

City Harrisburg State PA Zip Code 17111

Purpose of Disbursement Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type: **001**

Date of Disbursement: 09 / 19 / 2016

FEC Identification Number: **C**

Transaction ID : **D601895**

Amount of Each Disbursement this Period: 2658.59

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)
C. Central Pennsylvania Area Labor Federation, AFL-CIO

Mailing Address 4031 Executive Park Drive

City Harrisburg State PA Zip Code 17111

Purpose of Disbursement Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type: **001**

Date of Disbursement: 09 / 26 / 2016

FEC Identification Number: **C**

Transaction ID : **D601896**

Amount of Each Disbursement this Period: 3166.28

Memo Item * In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7746.47

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City
WASHINGTON

State
DC

Zip Code
20001

Purpose of Disbursement
Administrative Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	1	6

FEC Identification Number

C00488486

Transaction ID : D601880

Amount of Each Disbursement this Period

2120.36

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City
WASHINGTON

State
DC

Zip Code
20001

Purpose of Disbursement
Administrative Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	1	6

FEC Identification Number

C00488486

Transaction ID : D601881

Amount of Each Disbursement this Period

2355.96

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City
WASHINGTON

State
DC

Zip Code
20001

Purpose of Disbursement
Administrative Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	1	6

FEC Identification Number

C00488486

Transaction ID : D601882

Amount of Each Disbursement this Period

942.38

* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

5418.70

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D601883

Amount of Each Disbursement this Period

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D601884

Amount of Each Disbursement this Period

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D601885

Amount of Each Disbursement this Period

* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Working America Coalition

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City
WASHINGTON

State
DC

Zip Code
20001

Purpose of Disbursement
Administrative Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	6

FEC Identification Number

C00488486

Transaction ID : D601886

Amount of Each Disbursement this Period

2355.96

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City
WASHINGTON

State
DC

Zip Code
20001

Purpose of Disbursement
Administrative Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	1	6

FEC Identification Number

C00488486

Transaction ID : D601887

Amount of Each Disbursement this Period

471.19

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City
WASHINGTON

State
DC

Zip Code
20001

Purpose of Disbursement
Administrative Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	1	6

FEC Identification Number

C00488486

Transaction ID : D601888

Amount of Each Disbursement this Period

2355.96

* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

5183.11

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)
A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 08 / 2016

FEC Identification Number: C00488486

Transaction ID : D601889

Amount of Each Disbursement this Period: 2355.96

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)
B. Eau Claire Labor Temple Building Association

Mailing Address 2233 Birch Street

City Eau Claire State WI Zip Code 54703

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 27 / 2016

FEC Identification Number: C

Transaction ID : D602449

Amount of Each Disbursement this Period: 1028.16

Memo Item

Full Name (Last, First, Middle Initial)
C. Eberts and Harrison, Inc.

Mailing Address 1604 Ridgeside Drive Suite 203

City Mounty Airy State MD Zip Code 21771

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 01 / 2016

FEC Identification Number: C

Transaction ID : D600028

Amount of Each Disbursement this Period: 525.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3909.12

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

Mailing Address 1125 17TH ST, NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement Administrative Inkind Staff

001
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 19 / 2016

FEC Identification Number
C C00029504
Transaction ID : D601900
Amount of Each Disbursement this Period
2528.12

Memo Item * In-Kind

B. ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

Mailing Address 1125 17TH ST, NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement Administrative Inkind Staff

001
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number
C C00029504
Transaction ID : D601901
Amount of Each Disbursement this Period
2528.12

Memo Item * In-Kind

C. ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

Mailing Address 1125 17TH ST, NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement Administrative Inkind Staff

001
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 12 / 2016

FEC Identification Number
C C00029504
Transaction ID : D601902
Amount of Each Disbursement this Period
2528.12

Memo Item * In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7584.36

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. Florida AFL-CIO General Fund		Date of Disbursement MM / DD / YYYY 08 / 29 / 2016
Mailing Address c/o Mike Williams 135 S. Monroe Street		FEC Identification Number C [] Transaction ID : D601824 Amount of Each Disbursement this Period [] 7698.78 * In-Kind <input type="checkbox"/> Memo Item
City Tallahassee	State FL	Zip Code 32301
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Florida AFL-CIO General Fund		Date of Disbursement MM / DD / YYYY 07 / 25 / 2016
Mailing Address c/o Mike Williams 135 S. Monroe Street		FEC Identification Number C [] Transaction ID : D601825 Amount of Each Disbursement this Period [] 1915.13 * In-Kind <input type="checkbox"/> Memo Item
City Tallahassee	State FL	Zip Code 32301
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Florida AFL-CIO General Fund		Date of Disbursement MM / DD / YYYY 08 / 01 / 2016
Mailing Address c/o Mike Williams 135 S. Monroe Street		FEC Identification Number C [] Transaction ID : D601826 Amount of Each Disbursement this Period [] 12213.35 * In-Kind <input type="checkbox"/> Memo Item
City Tallahassee	State FL	Zip Code 32301
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[] 21827.26
[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. Florida AFL-CIO General Fund		Date of Disbursement MM / DD / YYYY 09 / 12 / 2016
Mailing Address c/o Mike Williams 135 S. Monroe Street		FEC Identification Number C [] Transaction ID : D601827 Amount of Each Disbursement this Period [] 8409.83 * In-Kind <input type="checkbox"/> Memo Item
City Tallahassee	State FL	Zip Code 32301
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Florida AFL-CIO General Fund		Date of Disbursement MM / DD / YYYY 09 / 05 / 2016
Mailing Address c/o Mike Williams 135 S. Monroe Street		FEC Identification Number C [] Transaction ID : D601828 Amount of Each Disbursement this Period [] 8342.08 * In-Kind <input type="checkbox"/> Memo Item
City Tallahassee	State FL	Zip Code 32301
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Florida AFL-CIO General Fund		Date of Disbursement MM / DD / YYYY 09 / 26 / 2016
Mailing Address c/o Mike Williams 135 S. Monroe Street		FEC Identification Number C [] Transaction ID : D601829 Amount of Each Disbursement this Period [] 7687.80 * In-Kind <input type="checkbox"/> Memo Item
City Tallahassee	State FL	Zip Code 32301
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

[] 24439.71

TOTAL This Period (last page this line number only)..... ▶

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. Florida AFL-CIO General Fund		Date of Disbursement MM / DD / YYYY 08 / 22 / 2016
Mailing Address c/o Mike Williams 135 S. Monroe Street		FEC Identification Number C [REDACTED] Transaction ID : D601830 Amount of Each Disbursement this Period 11343.00
City Tallahassee	State FL	Zip Code 32301
Purpose of Disbursement Administrative Inkind Staff		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item * In-Kind	

Full Name (Last, First, Middle Initial) B. Florida AFL-CIO General Fund		Date of Disbursement MM / DD / YYYY 08 / 15 / 2016
Mailing Address c/o Mike Williams 135 S. Monroe Street		FEC Identification Number C [REDACTED] Transaction ID : D601831 Amount of Each Disbursement this Period 12043.70
City Tallahassee	State FL	Zip Code 32301
Purpose of Disbursement Administrative Inkind Staff		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item * In-Kind	

Full Name (Last, First, Middle Initial) C. Florida AFL-CIO General Fund		Date of Disbursement MM / DD / YYYY 08 / 08 / 2016
Mailing Address c/o Mike Williams 135 S. Monroe Street		FEC Identification Number C [REDACTED] Transaction ID : D601832 Amount of Each Disbursement this Period 12860.15
City Tallahassee	State FL	Zip Code 32301
Purpose of Disbursement Administrative Inkind Staff		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item * In-Kind	

SUBTOTAL of Disbursements This Page (optional).....▶	36246.85
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. Florida AFL-CIO General Fund		Date of Disbursement MM / DD / YYYY 09 / 19 / 2016
Mailing Address c/o Mike Williams 135 S. Monroe Street		FEC Identification Number C [] Transaction ID : D601833 Amount of Each Disbursement this Period [] 8023.12 * In-Kind <input type="checkbox"/> Memo Item
City Tallahassee	State FL	Zip Code 32301
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Florida AFL-CIO General Fund		Date of Disbursement MM / DD / YYYY 07 / 25 / 2016
Mailing Address c/o Mike Williams 135 S. Monroe Street		FEC Identification Number C [] Transaction ID : D602517 Amount of Each Disbursement this Period [] 819.20 * In-Kind <input type="checkbox"/> Memo Item
City Tallahassee	State FL	Zip Code 32301
Purpose of Disbursement Administrative Inkind Staff		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. IAM District 9		Date of Disbursement MM / DD / YYYY 09 / 08 / 2016
Mailing Address 12365 ST. CHARLES ROCK ROAD		FEC Identification Number C [] Transaction ID : D600043 Amount of Each Disbursement this Period [] 2762.50 * In-Kind <input type="checkbox"/> Memo Item
City BRIDGETON	State MO	Zip Code 63044
Purpose of Disbursement Rent		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 11604.82
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. IMAW District Lodge 66		Date of Disbursement MM / DD / YYYY 09 / 08 / 2016
Mailing Address 1307 Market St		FEC Identification Number C Transaction ID : D602432 Amount of Each Disbursement this Period 1914.94
City La Crosse	State WI	
Zip Code 54601-4846	Purpose of Disbursement Rent	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. IBEW Local #430		Date of Disbursement MM / DD / YYYY 09 / 08 / 2016
Mailing Address 1840 Sycamore Ave # A		FEC Identification Number C Transaction ID : D602434 Amount of Each Disbursement this Period 882.00
City Racine	State WI	
Zip Code 53406-4893	Purpose of Disbursement Rent	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. IBEW Local 1147		Date of Disbursement MM / DD / YYYY 09 / 08 / 2016
Mailing Address 220 Johnson St		FEC Identification Number C Transaction ID : D602433 Amount of Each Disbursement this Period 1010.00
City Wisconsin Rapids	State WI	
Zip Code 54495-2744	Purpose of Disbursement Rent	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

3806.94

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Working America Coalition

Full Name (Last, First, Middle Initial)

A. International Union of Painters and Allied Trades Political Action Together Political Comm

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

Mailing Address 1750 New York Avenue, NW

FEC Identification Number

C	C00000885
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Transaction ID : D601834

Amount of Each Disbursement this Period

272.03

* In-Kind

Memo Item

City

Washington

State

DC

Zip Code

20006

Purpose of Disbursement

Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. IUPAT District Council 78

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2016

Mailing Address 2153 WEST OAK RIDGE ROAD

FEC Identification Number

C	
---	--

Transaction ID : D602441

Amount of Each Disbursement this Period

1040.00

Memo Item

City

Orlando

State

FL

Zip Code

32809

Purpose of Disbursement

Rent

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. JLP Enterprise, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2016

Mailing Address 1052 MAIN STREET, SUITE 102 B

FEC Identification Number

C	
---	--

Transaction ID : D602439

Amount of Each Disbursement this Period

1200.00

Memo Item

City

Stevens Point

State

WI

Zip Code

54481

Purpose of Disbursement

Rent

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

2512.03

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. LETTER CARRIER POLITICAL FUND

Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D602516
Amount of Each Disbursement this Period

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

B. LETTER CARRIER POLITICAL FUND

Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D601810
Amount of Each Disbursement this Period

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

C. LETTER CARRIER POLITICAL FUND

Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D601811
Amount of Each Disbursement this Period

Memo Item * In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. LETTER CARRIER POLITICAL FUND

Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D601812

Amount of Each Disbursement this Period

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. LETTER CARRIER POLITICAL FUND

Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D601813

Amount of Each Disbursement this Period

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. Lexicon

Mailing Address 10300 Farnham Drive

City Bethesda State MD Zip Code 20814

Purpose of Disbursement
Professional Services

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D602245

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Lexicon

Mailing Address 10300 Farnham Drive

City: Bethesda State: MD Zip Code: 20814

Purpose of Disbursement: Professional Services

001
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number
C
Transaction ID : D602246
Amount of Each Disbursement this Period
125.71

Memo Item

Full Name (Last, First, Middle Initial)

B. Lexicon

Mailing Address 10300 Farnham Drive

City: Bethesda State: MD Zip Code: 20814

Purpose of Disbursement: Professional Services

001
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number
C
Transaction ID : D602247
Amount of Each Disbursement this Period
377.19

Memo Item

Full Name (Last, First, Middle Initial)

C. Lexicon

Mailing Address 10300 Farnham Drive

City: Bethesda State: MD Zip Code: 20814

Purpose of Disbursement: Professional Services

001
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number
C
Transaction ID : D602248
Amount of Each Disbursement this Period
251.44

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

754.34

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Lexicon

Mailing Address 10300 Farnham Drive

City: Bethesda State: MD Zip Code: 20814

Purpose of Disbursement
Professional Services

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number
C
Transaction ID : D602249
Amount of Each Disbursement this Period
439.99

Memo Item

Full Name (Last, First, Middle Initial)

B. Lexicon

Mailing Address 10300 Farnham Drive

City: Bethesda State: MD Zip Code: 20814

Purpose of Disbursement
Professional Services

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number
C
Transaction ID : D602250
Amount of Each Disbursement this Period
377.13

Memo Item

Full Name (Last, First, Middle Initial)

C. Lexicon

Mailing Address 10300 Farnham Drive

City: Bethesda State: MD Zip Code: 20814

Purpose of Disbursement
Professional Services

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number
C
Transaction ID : D602251
Amount of Each Disbursement this Period
1005.68

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1822.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Working America Coalition

Full Name (Last, First, Middle Initial)

A. Los Angeles County Federation of Labor,AFL-CIO Member Communications Account

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		16		2016

Mailing Address 2130 W. James M. Wood Blvd.

FEC Identification Number

C

Transaction ID : D602000

Amount of Each Disbursement this Period

12128.43

* In-Kind Received

Memo Item

City Los Angeles State CA Zip Code 90006

Purpose of Disbursement
Field expenses

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Milwaukee Area Labor Council

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

Mailing Address 633 South Hawley Road

FEC Identification Number

C

Transaction ID : D600031

Amount of Each Disbursement this Period

3000.00

Memo Item

City Milwaukee State WI Zip Code 53214

Purpose of Disbursement
Rent

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Missouri AFL-CIO

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2016

Mailing Address 227 Jefferson Street

FEC Identification Number

C

Transaction ID : D600025

Amount of Each Disbursement this Period

2002.68

Memo Item

City Jefferson City State MO Zip Code 65101

Purpose of Disbursement
Rent

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

17131.11

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Programming Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2016

FEC Identification Number

C

Transaction ID : D611504

Amount of Each Disbursement this Period

4906.80

Memo Item

Full Name (Last, First, Middle Initial)

B. NALC, Local 1091

Mailing Address 4790 Deauville Drive Suite 100

City Orlando State FL Zip Code 32808

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016 Primary General Other (specify)

001
Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2016

FEC Identification Number

C

Transaction ID : D602447

Amount of Each Disbursement this Period

800.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NATIONAL FEDERATION OF PUBLIC AND PRIVATE EMPLOYEE'S

Mailing Address 1700 NW 66TH AVE., SUITE 100

City Fort Lauderdale State FL Zip Code 33313

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016 Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2016

FEC Identification Number

C

Transaction ID : D602446

Amount of Each Disbursement this Period

2789.55

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8496.35

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. National Treasury Employees Union Advocacy Cmtee

Mailing Address 1750 H Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

FEC Identification Number

C00623355

Transaction ID : D602515

Amount of Each Disbursement this Period

110.62

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. National Treasury Employees Union Advocacy Cmtee

Mailing Address 1750 H Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

FEC Identification Number

C00623355

Transaction ID : D601962

Amount of Each Disbursement this Period

816.72

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. Nevada State AFL-CIO

Mailing Address 1891 Whitney Mesa Drive

City Henderson State NV Zip Code 89014

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

FEC Identification Number

C

Transaction ID : D601903

Amount of Each Disbursement this Period

1400.00

* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2327.34

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Nevada State AFL-CIO

Mailing Address 1891 Whitney Mesa Drive

City Henderson State NV Zip Code 89014

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 08 / 2016

FEC Identification Number

C
Transaction ID : D601904
Amount of Each Disbursement this Period
 800.00

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

B. Nevada State AFL-CIO

Mailing Address 1891 Whitney Mesa Drive

City Henderson State NV Zip Code 89014

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 22 / 2016

FEC Identification Number

C
Transaction ID : D601905
Amount of Each Disbursement this Period
 2000.00

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

C. Nevada State AFL-CIO

Mailing Address 1891 Whitney Mesa Drive

City Henderson State NV Zip Code 89014

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 15 / 2016

FEC Identification Number

C
Transaction ID : D601906
Amount of Each Disbursement this Period
 2000.00

Memo Item * In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4800.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Nevada State, AFL-CIO

Mailing Address 1891 Whitney Mesa Dr
A

City Henderson State NV Zip Code 89014-2069

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2016

FEC Identification Number

C
Transaction ID : D602435
Amount of Each Disbursement this Period
1586.40

Memo Item

Full Name (Last, First, Middle Initial)

B. NGP VAN, INC.

Mailing Address 1225 Eye Street, NW
Suite 1225

City Washington State DC Zip Code 20005

Purpose of Disbursement
Software & Support

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2016

FEC Identification Number

C
Transaction ID : D600026
Amount of Each Disbursement this Period
600.00

Memo Item

Full Name (Last, First, Middle Initial)

C. North Carolina State AFL-CIO

Mailing Address P. O. Box 10805

City Raleigh State NC Zip Code 27605

Purpose of Disbursement
Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2016

FEC Identification Number

C
Transaction ID : D601952
Amount of Each Disbursement this Period
4377.23
* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6563.63

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. North Carolina State AFL-CIO		Date of Disbursement MM / DD / YYYY 09 / 12 / 2016
Mailing Address P. O. Box 10805		FEC Identification Number C [REDACTED]
City Raleigh	State NC	Zip Code 27605
Purpose of Disbursement Administrative Inkind Staff	Candidate Name	Transaction ID : D601953 Amount of Each Disbursement this Period 2451.05
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	* In-Kind <input type="checkbox"/> Memo Item
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. North Carolina State AFL-CIO		Date of Disbursement MM / DD / YYYY 08 / 29 / 2016
Mailing Address P. O. Box 10805		FEC Identification Number C [REDACTED]
City Raleigh	State NC	Zip Code 27605
Purpose of Disbursement Administrative Inkind Staff	Candidate Name	Transaction ID : D601954 Amount of Each Disbursement this Period 759.08
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	* In-Kind <input type="checkbox"/> Memo Item
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. North Carolina State AFL-CIO		Date of Disbursement MM / DD / YYYY 09 / 19 / 2016
Mailing Address P. O. Box 10805		FEC Identification Number C [REDACTED]
City Raleigh	State NC	Zip Code 27605
Purpose of Disbursement Administrative Inkind Staff	Candidate Name	Transaction ID : D601955 Amount of Each Disbursement this Period 766.94
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	* In-Kind <input type="checkbox"/> Memo Item
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....▶	3977.07
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. North Carolina State AFL-CIO

Mailing Address P. O. Box 10805

City Raleigh State NC Zip Code 27605

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

Transaction ID : D601956
Amount of Each Disbursement this Period

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

B. NORTH CENTRAL FLORIDA AFL-CIO

Mailing Address 1910 NW 53RD AVENUE, NW

City Gainesville State FL Zip Code 32653

Purpose of Disbursement
Rent

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 12 / 2016

FEC Identification Number

Transaction ID : D602444
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Northwest Florida Federation of Labor

Mailing Address 7830 N. Palafox Street

City Pensacola State FL Zip Code 32534

Purpose of Disbursement
Rent

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number

Transaction ID : D602448
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 19 / 2016

FEC Identification Number

Transaction ID : D601934
Amount of Each Disbursement this Period

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

B. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

Transaction ID : D601935
Amount of Each Disbursement this Period

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

C. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 05 / 2016

FEC Identification Number

Transaction ID : D601936
Amount of Each Disbursement this Period

Memo Item * In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 12 / 2016

FEC Identification Number
C
Transaction ID : D601937
Amount of Each Disbursement this Period
885.00
* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 01 / 2016

FEC Identification Number
C
Transaction ID : D601814
Amount of Each Disbursement this Period
10817.49
* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number
C
Transaction ID : D601815
Amount of Each Disbursement this Period
10191.05
* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

21893.54

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 22 / 2016

FEC Identification Number
C
Transaction ID : D601816
Amount of Each Disbursement this Period
11026.30
* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 08 / 2016

FEC Identification Number
C
Transaction ID : D601817
Amount of Each Disbursement this Period
10817.49
* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 19 / 2016

FEC Identification Number
C
Transaction ID : D601818
Amount of Each Disbursement this Period
9477.33
* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

31321.12

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 15 / 2016

FEC Identification Number
C
Transaction ID : D601819
Amount of Each Disbursement this Period
10817.49

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 05 / 2016

FEC Identification Number
C
Transaction ID : D601820
Amount of Each Disbursement this Period
7641.72

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 12 / 2016

FEC Identification Number
C
Transaction ID : D601821
Amount of Each Disbursement this Period
10191.05

Memo Item * In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

28650.26

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 29 / 2016

FEC Identification Number

Transaction ID : D601822
Amount of Each Disbursement this Period

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 25 / 2016

FEC Identification Number

Transaction ID : D601823
Amount of Each Disbursement this Period

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

C. PALM BEACH-TREASURE COAST AFL-CIO

Mailing Address 1001 W. 15TH STREET

City West Palm Beach State FL Zip Code 33404

Purpose of Disbursement
Rent

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 12 / 2016

FEC Identification Number

Transaction ID : D602445
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Petel & Co.

Mailing Address 1209 Fairmonth St. NW

City Washington State DC Zip Code 20009

Purpose of Disbursement Shipping Category/Type 004

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016 Primary General Other (specify) ▼
 State: District:

Date of Disbursement
MM / DD / YYYY
09 / 22 / 2016

FEC Identification Number
C
Transaction ID : D602242
Amount of Each Disbursement this Period
342.40

Memo Item

Full Name (Last, First, Middle Initial)

B. Petel & Co.

Mailing Address 1209 Fairmonth St. NW

City Washington State DC Zip Code 20009

Purpose of Disbursement Shipping Category/Type 004

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016 Primary General Other (specify) ▼
 State: District:

Date of Disbursement
MM / DD / YYYY
09 / 22 / 2016

FEC Identification Number
C
Transaction ID : D602243
Amount of Each Disbursement this Period
114.14

Memo Item

Full Name (Last, First, Middle Initial)

C. Petel & Co.

Mailing Address 1209 Fairmonth St. NW

City Washington State DC Zip Code 20009

Purpose of Disbursement Federal Shipping Category/Type 001

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016 Primary General Other (specify) ▼
 State: District:

Date of Disbursement
MM / DD / YYYY
07 / 29 / 2016

FEC Identification Number
C
Transaction ID : D602235
Amount of Each Disbursement this Period
858.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 1314.54

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Petel & Co.

Mailing Address 1209 Fairmonth St. NW

City Washington State DC Zip Code 20009

Purpose of Disbursement Federal Shipping
Candidate Name
Category/Type **001**

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 29 / 2016

FEC Identification Number
C
Transaction ID : **D602236**
Amount of Each Disbursement this Period
1034.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Petel & Co.

Mailing Address 1209 Fairmonth St. NW

City Washington State DC Zip Code 20009

Purpose of Disbursement Federal Shipping
Candidate Name
Category/Type **001**

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 29 / 2016

FEC Identification Number
C
Transaction ID : **D602237**
Amount of Each Disbursement this Period
1126.40

Memo Item

Full Name (Last, First, Middle Initial)

C. Petel & Co.

Mailing Address 1209 Fairmonth St. NW

City Washington State DC Zip Code 20009

Purpose of Disbursement Federal Shipping
Candidate Name
Category/Type **001**

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 29 / 2016

FEC Identification Number
C
Transaction ID : **D602238**
Amount of Each Disbursement this Period
1188.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... **3348.40**

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Petel & Co.

Mailing Address 1209 Fairmonth St. NW

City Washington State DC Zip Code 20009

Purpose of Disbursement Federal Shipping

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
07 / 29 / 2016

FEC Identification Number

Transaction ID : D602239
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Petel & Co.

Mailing Address 1209 Fairmonth St. NW

City Washington State DC Zip Code 20009

Purpose of Disbursement Federal Shipping

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
07 / 29 / 2016

FEC Identification Number

Transaction ID : D602240
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Philadelphia AFL-CIO Council General Fund

Mailing Address c/o Pat Eiding
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement Inkind Administrative staff

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
08 / 01 / 2016

FEC Identification Number

Transaction ID : D602006
Amount of Each Disbursement this Period

* In-Kind Received

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. PoliOps, LLC

Mailing Address 210 Rocketts Way
Unit 411

City Richmond State VA Zip Code 23231

Purpose of Disbursement
Software and Support

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 22 / 2016

FEC Identification Number

Transaction ID : D600516
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PoliOps, LLC

Mailing Address 210 Rocketts Way
Unit 411

City Richmond State VA Zip Code 23231

Purpose of Disbursement
Software and Support

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 06 / 2016

FEC Identification Number

Transaction ID : D600027
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Print Logistics

Mailing Address 1700 L Street

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Shipping

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 22 / 2016

FEC Identification Number

Transaction ID : D600515
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. SEIU Healthcare Missouri/Kansas

Mailing Address 5585 Pershing Ave

City Saint Louis State MO Zip Code 63112-4621

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2016

FEC Identification Number

C
Transaction ID : D602436
Amount of Each Disbursement this Period
961.61

Memo Item

Full Name (Last, First, Middle Initial)

B. SEMINOLE UNISERV

Mailing Address 813 ORIENTA AVENUE

City ALTAMONTE SPRINGS State FL Zip Code 32701

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2016

FEC Identification Number

C
Transaction ID : D602440
Amount of Each Disbursement this Period
1164.17

Memo Item

Full Name (Last, First, Middle Initial)

C. South Central Federation of Labor

Mailing Address 1602 S Park St
Rm 228

City Madison State WI Zip Code 53715-2181

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2016

FEC Identification Number

C
Transaction ID : D602437
Amount of Each Disbursement this Period
3000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5125.78

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Working America Coalition

Full Name (Last, First, Middle Initial)

A. South Central Federation of Labor

Mailing Address 1602 South Park Street

City
Madison

State
WI

Zip Code
53715

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	1	6

FEC Identification Number

C []

Transaction ID : D601897

Amount of Each Disbursement this Period

[] 457.38

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. South Central Federation of Labor

Mailing Address 1602 South Park Street

City
Madison

State
WI

Zip Code
53715

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	1	6

FEC Identification Number

C []

Transaction ID : D601898

Amount of Each Disbursement this Period

[] 365.91

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. South Central Federation of Labor

Mailing Address 1602 South Park Street

City
Madison

State
WI

Zip Code
53715

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	6

FEC Identification Number

C []

Transaction ID : D601899

Amount of Each Disbursement this Period

[] 457.38

* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[] 1280.67

TOTAL This Period (last page this line number only)..... ▶

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. SOUTH FLORIDA AFL-CIO

Mailing Address 4349 NW 36TH STREET, SUITE 107

City MIAMI SPRINGS State FL Zip Code 33166

Purpose of Disbursement
Rent

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 12 / 2016

FEC Identification Number

Transaction ID : D602442
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Southeastern PA Area Labor Federation, AFL-CIO

Mailing Address 1000 Germantown Pike
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Rent

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number

Transaction ID : D600032
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Southeastern Pennsylvania Area Labor Federation General Fund

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

Transaction ID : D601924
Amount of Each Disbursement this Period

* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Working America Coalition

Full Name (Last, First, Middle Initial)

A. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2016

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

FEC Identification Number

C

Transaction ID : D601925
Amount of Each Disbursement this Period

1582.54

* In-Kind

Memo Item

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2016

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

FEC Identification Number

C

Transaction ID : D601926
Amount of Each Disbursement this Period

1582.54

* In-Kind

Memo Item

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2016

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

FEC Identification Number

C

Transaction ID : D601927
Amount of Each Disbursement this Period

1582.54

* In-Kind

Memo Item

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

4747.62

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Working America Coalition

Full Name (Last, First, Middle Initial)

A. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	6

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

FEC Identification Number

C

Transaction ID : D601928

Amount of Each Disbursement this Period

158.25

* In-Kind

Memo Item

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	1	6

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

FEC Identification Number

C

Transaction ID : D601929

Amount of Each Disbursement this Period

1582.54

* In-Kind

Memo Item

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	1	6

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

FEC Identification Number

C

Transaction ID : D601930

Amount of Each Disbursement this Period

1266.03

* In-Kind

Memo Item

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

3006.82

TOTAL This Period (last page this line number only)..... ▶

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Working America Coalition

Full Name (Last, First, Middle Initial)

A. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2016

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

FEC Identification Number

C

Transaction ID : D601931
Amount of Each Disbursement this Period

1582.54

* In-Kind

Memo Item

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		05		2016

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

FEC Identification Number

C

Transaction ID : D601932
Amount of Each Disbursement this Period

1582.54

* In-Kind

Memo Item

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2016

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

FEC Identification Number

C

Transaction ID : D601933
Amount of Each Disbursement this Period

1582.54

* In-Kind

Memo Item

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

4747.62

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Working America Coalition

Full Name (Last, First, Middle Initial)

A. SPACE COAST AFL-CIO LABOR COUNCIL

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2016

Mailing Address P.O. BOX 3787

FEC Identification Number

C []

Transaction ID : D602443

Amount of Each Disbursement this Period

[] 813.66

Memo Item

City COCOA State FL Zip Code 32924

Purpose of Disbursement Rent

001
Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. St. Louis Central Labor Council

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2016

Mailing Address 3301 Hollenberg Drive

FEC Identification Number

C []

Transaction ID : D600042

Amount of Each Disbursement this Period

[] 1010.58

Memo Item

City Bridgeton State MO Zip Code 63044

Purpose of Disbursement Rent

001
Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Strategies Unlimited

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

Mailing Address 988 Circle on the Green

FEC Identification Number

C []

Transaction ID : D600571

Amount of Each Disbursement this Period

[] 29920.00

Memo Item

City Columbus State OH Zip Code 43235

Purpose of Disbursement Professional Services

001
Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

[] 31744.24

TOTAL This Period (last page this line number only)..... ▶

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Transportation Trades Department, AFL-CIO Political Education Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2016

Mailing Address 815 - 16th Street, NW

FEC Identification Number

C [REDACTED]

Transaction ID : D601877
Amount of Each Disbursement this Period

[REDACTED] 1256.12

City Washington State DC Zip Code 20006

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

B. Transportation Trades Department, AFL-CIO Political Education Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2016

Mailing Address 815 - 16th Street, NW

FEC Identification Number

C [REDACTED]

Transaction ID : D601878
Amount of Each Disbursement this Period

[REDACTED] 1395.69

City Washington State DC Zip Code 20006

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

C. Transportation Trades Department, AFL-CIO Political Education Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Mailing Address 815 - 16th Street, NW

FEC Identification Number

C [REDACTED]

Transaction ID : D601879
Amount of Each Disbursement this Period

[REDACTED] 1395.69

City Washington State DC Zip Code 20006

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item * In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 4047.50

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. UAW Local 291

Mailing Address 1118 HIGH AVENUE

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement
Rent

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

FEC Identification Number

C
Transaction ID : D600041
Amount of Each Disbursement this Period
 1528.00

Memo Item

Full Name (Last, First, Middle Initial)

B. UAW Local 72

Mailing Address 3615 WASHINGTON ROAD

City KENOSHA State WI Zip Code 53144

Purpose of Disbursement
Rent

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

FEC Identification Number

C
Transaction ID : D600045
Amount of Each Disbursement this Period
 825.00

Memo Item

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Purpose of Disbursement
Administrative Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2016

FEC Identification Number

C C00484253
Transaction ID : D601890
Amount of Each Disbursement this Period
 19413.27
* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

21766.27

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Mailing Address 1775 K Street, NW

City
Washington

State
DC

Zip Code
20006-1598

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	1	6

FEC Identification Number

C00484253

Transaction ID : D601891

Amount of Each Disbursement this Period

4110.51

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Mailing Address 1775 K Street, NW

City
Washington

State
DC

Zip Code
20006-1598

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	6

FEC Identification Number

C00484253

Transaction ID : D601892

Amount of Each Disbursement this Period

30626.43

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Mailing Address 1775 K Street, NW

City
Washington

State
DC

Zip Code
20006-1598

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	1	6

FEC Identification Number

C00484253

Transaction ID : D601893

Amount of Each Disbursement this Period

35200.08

* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

69937.02

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Mailing Address 1775 K Street, NW

City
Washington

State
DC

Zip Code
20006-1598

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	1	6

FEC Identification Number

C C00484253

Transaction ID : D602514

Amount of Each Disbursement this Period

7182.76

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. UFCW Local 1208

Mailing Address P.O. Box 69

City
Tar Heel

State
NC

Zip Code
28392

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	1	6

FEC Identification Number

C

Transaction ID : D602513

Amount of Each Disbursement this Period

31.54

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. UFCW Local 1208

Mailing Address P.O. Box 69

City
Tar Heel

State
NC

Zip Code
28392

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	6

FEC Identification Number

C

Transaction ID : D601959

Amount of Each Disbursement this Period

377.86

* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7592.16

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. UFCW Local 1208

Mailing Address P.O. Box 69

City
Tar Heel

State
NC

Zip Code
28392

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2016

FEC Identification Number

C

Transaction ID : D601960

Amount of Each Disbursement this Period

94.61

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. UFCW Local 1208

Mailing Address P.O. Box 69

City
Tar Heel

State
NC

Zip Code
28392

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

C

Transaction ID : D601961

Amount of Each Disbursement this Period

186.23

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. UNITE HERE TIP STATE & LOCAL FUND

Mailing Address 275 7TH AVENUE, 16TH FLOOR

City
New York

State
NY

Zip Code
10001

Purpose of Disbursement
Administrative Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 22 / 2016

FEC Identification Number

C

Transaction ID : D602512

Amount of Each Disbursement this Period

51860.56

* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

52141.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. UNITE HERE TIP STATE & LOCAL FUND

Mailing Address 275 7TH AVENUE, 16TH FLOOR

City New York State NY Zip Code 10001

Purpose of Disbursement
In Kind Staff travel in NV

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : D602009
Amount of Each Disbursement this Period
233115.61
* In-Kind Received

Memo Item

Full Name (Last, First, Middle Initial)

B. UNITE HERE TIP STATE & LOCAL FUND

Mailing Address 275 7TH AVENUE, 16TH FLOOR

City New York State NY Zip Code 10001

Purpose of Disbursement
Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

C
Transaction ID : D601837
Amount of Each Disbursement this Period
130855.67
* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. UNITE HERE TIP STATE & LOCAL FUND

Mailing Address 275 7TH AVENUE, 16TH FLOOR

City New York State NY Zip Code 10001

Purpose of Disbursement
Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2016

FEC Identification Number

C
Transaction ID : D601838
Amount of Each Disbursement this Period
637.49
* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

364608.77

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. UNITE HERE TIP STATE & LOCAL FUND

Mailing Address 275 7TH AVENUE, 16TH FLOOR

City New York State NY Zip Code 10001

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D601839
Amount of Each Disbursement this Period

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

B. UNITE HERE TIP STATE & LOCAL FUND

Mailing Address 275 7TH AVENUE, 16TH FLOOR

City New York State NY Zip Code 10001

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D601840
Amount of Each Disbursement this Period

Memo Item * In-Kind

Full Name (Last, First, Middle Initial)

C. UNITE HERE TIP STATE & LOCAL FUND

Mailing Address 275 7TH AVENUE, 16TH FLOOR

City New York State NY Zip Code 10001

Purpose of Disbursement
Administrative Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D601841
Amount of Each Disbursement this Period

Memo Item * In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. USW District 2

Mailing Address 1244 Midway Rd
A

City Menasha State WI Zip Code 54952-1128

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: 2016
 Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

FEC Identification Number

C
Transaction ID : D602438
Amount of Each Disbursement this Period
728.00

Memo Item

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Mailing Address 80 F STREET NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For:
 Primary General Other (specify)

001
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 18 / 2016

FEC Identification Number

C C00512293
Transaction ID : D602511
Amount of Each Disbursement this Period
14514.58
* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Mailing Address 80 F STREET NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Administrative Inkind Staff

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For:
 Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

FEC Identification Number

C C00512293
Transaction ID : D601844
Amount of Each Disbursement this Period
25015.08
* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

40257.66

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2016

Mailing Address 80 F STREET NW

FEC Identification Number

C	C00512293
---	-----------

City WASHINGTON State DC Zip Code 20001

Transaction ID : D601845

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

11955.46

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item * In-Kind

State: District:

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		18		2016

Mailing Address 80 F STREET NW

FEC Identification Number

C	C00512293
---	-----------

City WASHINGTON State DC Zip Code 20001

Transaction ID : D601846

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

4763.04

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item * In-Kind

State: District:

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2016

Mailing Address 80 F STREET NW

FEC Identification Number

C	C00512293
---	-----------

City WASHINGTON State DC Zip Code 20001

Transaction ID : D601847

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

20171.99

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item * In-Kind

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

36890.49

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		25		2016

Mailing Address 80 F STREET NW

FEC Identification Number

C	C00512293
---	-----------

City WASHINGTON State DC Zip Code 20001

Transaction ID : D601848

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

10515.64

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item * In-Kind

State: District:

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		05		2016

Mailing Address 80 F STREET NW

FEC Identification Number

C	C00512293
---	-----------

City WASHINGTON State DC Zip Code 20001

Transaction ID : D601849

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

28397.86

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item * In-Kind

State: District:

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2016

Mailing Address 80 F STREET NW

FEC Identification Number

C	C00512293
---	-----------

City WASHINGTON State DC Zip Code 20001

Transaction ID : D601850

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

32986.98

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item * In-Kind

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

71900.48

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

Mailing Address 80 F STREET NW

M M M	/	D D D	/	Y Y Y Y Y
08		15		2016

City
WASHINGTON

State
DC

Zip Code
20001

FEC Identification Number

Purpose of Disbursement
Administrative Inkind Staff

C	C00512293
---	-----------

001
Category/ Type

Transaction ID : D601851

Amount of Each Disbursement this Period

11993.52

* In-Kind

Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

Mailing Address 80 F STREET NW

M M M	/	D D D	/	Y Y Y Y Y
08		22		2016

City
WASHINGTON

State
DC

Zip Code
20001

FEC Identification Number

Purpose of Disbursement
Administrative Inkind Staff

C	C00512293
---	-----------

001
Category/ Type

Transaction ID : D601852

Amount of Each Disbursement this Period

19355.62

* In-Kind

Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

Mailing Address 80 F STREET NW

M M M	/	D D D	/	Y Y Y Y Y
08		08		2016

City
WASHINGTON

State
DC

Zip Code
20001

FEC Identification Number

Purpose of Disbursement
Administrative Inkind Staff

C	C00512293
---	-----------

001
Category/ Type

Transaction ID : D601853

Amount of Each Disbursement this Period

13548.44

* In-Kind

Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

44897.58

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Working America Coalition

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2016

Mailing Address 80 F STREET NW

FEC Identification Number

C	C00512293
---	-----------

City WASHINGTON State DC Zip Code 20001

Transaction ID : D601854
Amount of Each Disbursement this Period

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

45377.41

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item * In-Kind

State: District:

Full Name (Last, First, Middle Initial)

B. Wausau Labor Temple

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	27	/	2016

Mailing Address 318 S. 3rd Ave.

FEC Identification Number

C	
---	--

City Wausau State WI Zip Code 54401

Transaction ID : D602450
Amount of Each Disbursement this Period

Purpose of Disbursement
Rent

Category/ Type

1788.00

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. WI State AFL-CIO: New Alliance

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	18	/	2016

Mailing Address 6333 West Bluemound Road

FEC Identification Number

C	
---	--

City Milwaukee State WI Zip Code 53213

Transaction ID : D602510
Amount of Each Disbursement this Period

Purpose of Disbursement
Administrative Inkind Staff

001
Category/ Type

361.68

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item * In-Kind

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

47527.09

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Working America Coalition

Full Name (Last, First, Middle Initial)

A. WI State AFL-CIO: New Alliance

Mailing Address 6333 West Bluemound Road

City Milwaukee

State WI

Zip Code 53213

Purpose of Disbursement Administrative Inkind Staff

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2016

FEC Identification Number

C []

Transaction ID : D601907

Amount of Each Disbursement this Period

[] 4617.65

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. WI State AFL-CIO: New Alliance

Mailing Address 6333 West Bluemound Road

City Milwaukee

State WI

Zip Code 53213

Purpose of Disbursement Administrative Inkind Staff

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 29 / 2016

FEC Identification Number

C []

Transaction ID : D601908

Amount of Each Disbursement this Period

[] 4431.08

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. WI State AFL-CIO: New Alliance

Mailing Address 6333 West Bluemound Road

City Milwaukee

State WI

Zip Code 53213

Purpose of Disbursement Administrative Inkind Staff

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2016

FEC Identification Number

C []

Transaction ID : D601909

Amount of Each Disbursement this Period

[] 951.08

* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[] 9999.81

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Working America Coalition

Full Name (Last, First, Middle Initial)

A. WI State AFL-CIO: New Alliance

Mailing Address 6333 West Bluemound Road

City Milwaukee State WI Zip Code 53213

Purpose of Disbursement Administrative Inkind Staff

001

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 18 / 2016

FEC Identification Number

C
Transaction ID : D601910
Amount of Each Disbursement this Period
464.00
* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. WI State AFL-CIO: New Alliance

Mailing Address 6333 West Bluemound Road

City Milwaukee State WI Zip Code 53213

Purpose of Disbursement Administrative Inkind Staff

001

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2016

FEC Identification Number

C
Transaction ID : D601911
Amount of Each Disbursement this Period
3526.15
* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. WI State AFL-CIO: New Alliance

Mailing Address 6333 West Bluemound Road

City Milwaukee State WI Zip Code 53213

Purpose of Disbursement Administrative Inkind Staff

001

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

C
Transaction ID : D601912
Amount of Each Disbursement this Period
4755.38
* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8745.53

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Working America Coalition

Full Name (Last, First, Middle Initial)

A. WI State AFL-CIO: New Alliance

Mailing Address 6333 West Bluemound Road

City Milwaukee State WI Zip Code 53213

Purpose of Disbursement Administrative Inkind Staff

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 22 / 2016

FEC Identification Number

C

Transaction ID : D601913

Amount of Each Disbursement this Period

4420.88

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

B. WI State AFL-CIO: New Alliance

Mailing Address 6333 West Bluemound Road

City Milwaukee State WI Zip Code 53213

Purpose of Disbursement Administrative Inkind Staff

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2016

FEC Identification Number

C

Transaction ID : D601914

Amount of Each Disbursement this Period

4755.38

* In-Kind

Memo Item

Full Name (Last, First, Middle Initial)

C. WI State AFL-CIO: New Alliance

Mailing Address 6333 West Bluemound Road

City Milwaukee State WI Zip Code 53213

Purpose of Disbursement Administrative Inkind Staff

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2016

FEC Identification Number

C

Transaction ID : D601915

Amount of Each Disbursement this Period

4651.54

* In-Kind

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

13827.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. WI State AFL-CIO: New Alliance		Date of Disbursement MM / DD / YYYY 08 / 01 / 2016
Mailing Address 6333 West Bluemound Road		FEC Identification Number C [REDACTED] Transaction ID : D601916 Amount of Each Disbursement this Period [REDACTED] 4414.71 * In-Kind <input type="checkbox"/> Memo Item
City Milwaukee	State WI	Zip Code 53213
Purpose of Disbursement Administrative Inkind Staff		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. WI State AFL-CIO: New Alliance		Date of Disbursement MM / DD / YYYY 09 / 05 / 2016
Mailing Address 6333 West Bluemound Road		FEC Identification Number C [REDACTED] Transaction ID : D601917 Amount of Each Disbursement this Period [REDACTED] 4732.31 * In-Kind <input type="checkbox"/> Memo Item
City Milwaukee	State WI	Zip Code 53213
Purpose of Disbursement Administrative Inkind Staff		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Wisconsin Education Association Council Region 3		Date of Disbursement MM / DD / YYYY 09 / 13 / 2016
Mailing Address 1136 N. MILITARY AVENUE		FEC Identification Number C [REDACTED] Transaction ID : D600044 Amount of Each Disbursement this Period [REDACTED] 1987.03 * In-Kind <input type="checkbox"/> Memo Item
City GREEN BAY	State WI	Zip Code 54303
Purpose of Disbursement Rent		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 11134.05
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial) A. Wisconsin, AFL-CIO		Date of Disbursement MM / DD / YYYY 09 / 27 / 2016	
Mailing Address 6333 West Bluemound		FEC Identification Number C []	
City Milwaukee	State WI	Zip Code 53213	Transaction ID : D602451
Purpose of Disbursement Rent		Category/ Type []	Amount of Each Disbursement this Period 2400.00
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type []	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type []	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	2400.00
TOTAL This Period (last page this line number only).....▶	4638326.75

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. For Our Future

Mailing Address 888 16th St NW

City Washington State DC Zip Code 20006

Purpose of Disbursement Contribution

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			01			2016			

FEC Identification Number

Transaction ID : D602241
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

 Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

92250.00
92250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Grassroots Campaigns, Inc.

Mailing Address 186 Lincoln Street, First Floor

City Boston State MA Zip Code 02111

Purpose of Disbursement
Non-Federal Canvassing Services

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

FEC Identification Number

C
Transaction ID : D599433
Amount of Each Disbursement this Period
 77066.66

Memo Item

Full Name (Last, First, Middle Initial)

B. Lexicon

Mailing Address 10300 Farnham Drive

City Bethesda State MD Zip Code 20814

Purpose of Disbursement
Professional Services

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : D602252
Amount of Each Disbursement this Period
 82.50

Memo Item

Full Name (Last, First, Middle Initial)

C. Lexicon

Mailing Address 10300 Farnham Drive

City Bethesda State MD Zip Code 20814

Purpose of Disbursement
Professional Services

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : D602253
Amount of Each Disbursement this Period
 82.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

165.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Lexicon

Mailing Address 10300 Farnham Drive

City: Bethesda State: MD Zip Code: 20814

Purpose of Disbursement: Professional Services

001
 002
 003
 004
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : D602254
Amount of Each Disbursement this Period
 495.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Lexicon

Mailing Address 10300 Farnham Drive

City: Bethesda State: MD Zip Code: 20814

Purpose of Disbursement: Professional Services

001
 002
 003
 004
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : D602255
Amount of Each Disbursement this Period
 165.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Lexicon

Mailing Address 10300 Farnham Drive

City: Bethesda State: MD Zip Code: 20814

Purpose of Disbursement: Professional Services

001
 002
 003
 004
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : D602256
Amount of Each Disbursement this Period
 82.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

742.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Lexicon

Mailing Address 10300 Farnham Drive

City: Bethesda State: MD Zip Code: 20814

Purpose of Disbursement: Professional Services

001
 002
 003
 004
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number
C
Transaction ID : D602257
Amount of Each Disbursement this Period
742.50

Memo Item

Full Name (Last, First, Middle Initial)

B. Lexicon

Mailing Address 10300 Farnham Drive

City: Bethesda State: MD Zip Code: 20814

Purpose of Disbursement: Professional Services

001
 002
 003
 004
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number
C
Transaction ID : D602258
Amount of Each Disbursement this Period
742.50

Memo Item

Full Name (Last, First, Middle Initial)

C. Lexicon

Mailing Address 10300 Farnham Drive

City: Bethesda State: MD Zip Code: 20814

Purpose of Disbursement: Professional Services

001
 002
 003
 004
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number
C
Transaction ID : D602259
Amount of Each Disbursement this Period
990.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2475.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Lexicon

Mailing Address 10300 Farnham Drive

City Bethesda State MD Zip Code 20814

Purpose of Disbursement Professional Services

001
 002
 003
 004
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : D602319
Amount of Each Disbursement this Period
 330.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mack-Summer Communications, LLC.

Mailing Address 2001 N. Beauregard Street Suite 420

City Alexandria State VA Zip Code 22311

Purpose of Disbursement Printing - Non-Federal Canvassing Literature

001
 002
 003
 004
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

FEC Identification Number

C
Transaction ID : D599439
Amount of Each Disbursement this Period
 1906.66

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers

001
 002
 003
 004
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

FEC Identification Number

C
Transaction ID : D599667
Amount of Each Disbursement this Period
 45.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2236.66

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 19 / 2016

FEC Identification Number
C
Transaction ID : D599668
Amount of Each Disbursement this Period
240.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 19 / 2016

FEC Identification Number
C
Transaction ID : D599669
Amount of Each Disbursement this Period
450.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 19 / 2016

FEC Identification Number
C
Transaction ID : D599670
Amount of Each Disbursement this Period
45.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

FEC Identification Number

C

Transaction ID : D599671
Amount of Each Disbursement this Period

510.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 20 / 2016

FEC Identification Number

C

Transaction ID : D599826
Amount of Each Disbursement this Period

270.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 20 / 2016

FEC Identification Number

C

Transaction ID : D599827
Amount of Each Disbursement this Period

135.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:
Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number
C
Transaction ID : D599929
Amount of Each Disbursement this Period
72.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:
Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement
MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number
C
Transaction ID : D599948
Amount of Each Disbursement this Period
90.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:
Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number
C
Transaction ID : D599950
Amount of Each Disbursement this Period
135.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 09 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : D592934

Amount of Each Disbursement this Period

[REDACTED] 450.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 27 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : D593808

Amount of Each Disbursement this Period

[REDACTED] 42.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : D593809

Amount of Each Disbursement this Period

[REDACTED] 450.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 942.00

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

004
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
08 / 26 / 2016

FEC Identification Number
C
Transaction ID : D593812
Amount of Each Disbursement this Period
180.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

004
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
08 / 27 / 2016

FEC Identification Number
C
Transaction ID : D593813
Amount of Each Disbursement this Period
42.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

004
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 12 / 2016

FEC Identification Number
C
Transaction ID : D597521
Amount of Each Disbursement this Period
450.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

222.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 12 / 2016

FEC Identification Number: C

Transaction ID : D597522

Amount of Each Disbursement this Period: 180.00

Memo Item

B. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 13 / 2016

FEC Identification Number: C

Transaction ID : D597583

Amount of Each Disbursement this Period: 450.00

Memo Item

C. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 14 / 2016

FEC Identification Number: C

Transaction ID : D597698

Amount of Each Disbursement this Period: 600.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 16 / 2016

FEC Identification Number
C
Transaction ID : D599292
Amount of Each Disbursement this Period
180.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 16 / 2016

FEC Identification Number
C
Transaction ID : D599293
Amount of Each Disbursement this Period
180.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 17 / 2016

FEC Identification Number
C
Transaction ID : D599393
Amount of Each Disbursement this Period
270.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 17 / 2016

FEC Identification Number
C
Transaction ID : D599394
Amount of Each Disbursement this Period
180.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 17 / 2016

FEC Identification Number
C
Transaction ID : D599395
Amount of Each Disbursement this Period
270.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 17 / 2016

FEC Identification Number
C
Transaction ID : D599396
Amount of Each Disbursement this Period
360.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

004
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

FEC Identification Number

C
Transaction ID : D599397
Amount of Each Disbursement this Period
 360.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

004
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

FEC Identification Number

C
Transaction ID : D599398
Amount of Each Disbursement this Period
 360.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

004
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016 Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2016

FEC Identification Number

C
Transaction ID : D600230
Amount of Each Disbursement this Period
 270.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 23 / 2016

FEC Identification Number: C

Transaction ID : D600245

Amount of Each Disbursement this Period: 450.00

Memo Item

B. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 24 / 2016

FEC Identification Number: C

Transaction ID : D600408

Amount of Each Disbursement this Period: 90.00

Memo Item

C. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2016

FEC Identification Number: C

Transaction ID : D600936

Amount of Each Disbursement this Period: 420.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

Transaction ID : D600937
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers-NV

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement
MM / DD / YYYY
07 / 23 / 2016

FEC Identification Number

Transaction ID : D605863
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers-NV

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
07 / 23 / 2016

FEC Identification Number

Transaction ID : D605864
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers-WI

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 08 / 2016

FEC Identification Number: C

Transaction ID : D605865

Amount of Each Disbursement this Period: 180.00

Memo Item

B. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers-PA

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 09 / 2016

FEC Identification Number: C

Transaction ID : D605867

Amount of Each Disbursement this Period: 360.00

Memo Item

C. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers-WI

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 10 / 2016

FEC Identification Number: C

Transaction ID : D605868

Amount of Each Disbursement this Period: 90.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 630.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers-WI

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2016

FEC Identification Number

C []

Transaction ID : D605869
Amount of Each Disbursement this Period

[] 360.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers-WI

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2016

FEC Identification Number

C []

Transaction ID : D605879
Amount of Each Disbursement this Period

[] 450.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers-WI

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2016

FEC Identification Number

C []

Transaction ID : D605881
Amount of Each Disbursement this Period

[] 135.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[] 945.00

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers-WI

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 12 / 2016

FEC Identification Number: C

Transaction ID : D605882

Amount of Each Disbursement this Period: 90.00

Memo Item

B. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers-NV

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 13 / 2016

FEC Identification Number: C

Transaction ID : D605883

Amount of Each Disbursement this Period: 180.00

Memo Item

C. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers-NV

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 13 / 2016

FEC Identification Number: C

Transaction ID : D605884

Amount of Each Disbursement this Period: 480.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 750.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers-NV

004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 20 / 2016

FEC Identification Number
C
Transaction ID : D605886
Amount of Each Disbursement this Period
180.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers-WI

004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 25 / 2016

FEC Identification Number
C
Transaction ID : D605887
Amount of Each Disbursement this Period
360.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers-PA

004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 30 / 2016

FEC Identification Number
C
Transaction ID : D605888
Amount of Each Disbursement this Period
90.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

630.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2016

FEC Identification Number

C

Transaction ID : D606254
Amount of Each Disbursement this Period

120.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

FEC Identification Number

C

Transaction ID : D606256
Amount of Each Disbursement this Period

180.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

FEC Identification Number

C

Transaction ID : D606258
Amount of Each Disbursement this Period

360.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

FEC Identification Number

C
Transaction ID : D606263
Amount of Each Disbursement this Period
 540.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2016

FEC Identification Number

C
Transaction ID : D606264
Amount of Each Disbursement this Period
 600.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers-PA

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2016

FEC Identification Number

C
Transaction ID : D608477
Amount of Each Disbursement this Period
 45.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers-PA

004
Category/
Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement
MM / DD / YYYY
09 / 24 / 2016

FEC Identification Number
C
Transaction ID : D608478
Amount of Each Disbursement this Period
45.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers-PA

004
Category/
Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement
MM / DD / YYYY
09 / 24 / 2016

FEC Identification Number
C
Transaction ID : D608479
Amount of Each Disbursement this Period
45.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mosaic

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Non Federal Fliers-PA

004
Category/
Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement
MM / DD / YYYY
09 / 24 / 2016

FEC Identification Number
C
Transaction ID : D608480
Amount of Each Disbursement this Period
45.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Working America Coalition

A. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2016

FEC Identification Number: C

Transaction ID : D608498

Amount of Each Disbursement this Period: 120.00

Memo Item

B. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2016

FEC Identification Number: C

Transaction ID : D608862

Amount of Each Disbursement this Period: 180.00

Memo Item

C. Mosaic

Full Name (Last, First, Middle Initial)

Mailing Address 4801 Viewpoint Place

City Cheverly State MD Zip Code 20781

Purpose of Disbursement Non Federal Fliers

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 20 / 2016

FEC Identification Number: C

Transaction ID : D608863

Amount of Each Disbursement this Period: 450.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 630.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Working America Coalition

Full Name (Last, First, Middle Initial)

A. Petel & Co.

Mailing Address 1209 Fairmonth St. NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Non Federal Fliers

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : D602573

Amount of Each Disbursement this Period

[REDACTED] 1750.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Petel & Co.

Mailing Address 1209 Fairmonth St. NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Non Federal Direct Mail

Candidate Name

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : D601228

Amount of Each Disbursement this Period

[REDACTED] 4350.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Petel & Co.

Mailing Address 1209 Fairmonth St. NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Non-Federal Fliers

Candidate Name

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : D592570

Amount of Each Disbursement this Period

[REDACTED] 5875.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 11975.00

[REDACTED] 22583.16

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 170 OF 229
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Working America Coalition

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Grassroots Campaigns, Inc.			Nature of Debt (Purpose): Canvassing Services
Mailing Address 186 Lincoln Street, First Floor			
City Boston	State MA	Zip Code 02111	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D602581	
Amount Incurred This Period 231200.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 231200.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mosaic			Nature of Debt (Purpose): Fliers
Mailing Address 4801 Viewpoint Place			
City Cheverly	State MD	Zip Code 20781	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D611421	
Amount Incurred This Period 31272.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 31272.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	262472.00
2) TOTALS This Period (last page this line number only)..... ▶	262472.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	262472.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Petel & Co.
Mailing Address 1209 Fairmonth St. NW
City Washington State DC Zip Code 20009
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 07/25/2016
Amount 3375.00
Transaction ID : D592563
Date of Disbursement or Obligation 08/03/2016

Name of Federal Candidate: STRICKLAND, TED, ,
Support Oppose
Office Sought: House Senate State: OH
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Petel & Co.
Mailing Address 1209 Fairmonth St. NW
City Washington State DC Zip Code 20009
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 07/25/2016
Amount 2575.00
Transaction ID : D592564
Date of Disbursement or Obligation 08/03/2016

Name of Federal Candidate: JOHNSON, RONALD, HAROLD, ,
Support Oppose
Office Sought: House Senate State: WI
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 5950.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, ,

[Electronically Filed]

Date

10/27/2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Petel & Co.
Mailing Address 1209 Fairmonth St. NW
City Washington State DC Zip Code 20009
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 07/25/2016
Amount 4950.00
Transaction ID : D592565
Date of Disbursement or Obligation 08/03/2016

Name of Federal Candidate: RUBIO, MARCO, , ,
Support Oppose
Office Sought: House Senate State: FL
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Petel & Co.
Mailing Address 1209 Fairmonth St. NW
City Washington State DC Zip Code 20009
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 07/25/2016
Amount 2475.00
Transaction ID : D592566
Date of Disbursement or Obligation 08/03/2016

Name of Federal Candidate: TRUMP, DONALD, J., ,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 7425.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

10/27/2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620583 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016			
Mailing Address 1209 Fairmonth St. NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3200.00</div> Transaction ID : D592567 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 03 / 2016			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Washington</td> <td style="width:17%; padding: 2px;">State DC</td> <td style="width:50%; padding: 2px;">Zip Code 20009</td> </tr> </table>		City Washington	State DC	Zip Code 20009
City Washington		State DC	Zip Code 20009	
Purpose of Expenditure Fliers Category/Type 004				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD, J., ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016			
Mailing Address 1209 Fairmonth St. NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2681.25</div> Transaction ID : D592568 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 03 / 2016			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Washington</td> <td style="width:17%; padding: 2px;">State DC</td> <td style="width:50%; padding: 2px;">Zip Code 20009</td> </tr> </table>		City Washington	State DC	Zip Code 20009
City Washington		State DC	Zip Code 20009	
Purpose of Expenditure Fliers Category/Type 004				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Rodham Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">5881.25</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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King, Crystal, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00620583 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">07 / 25 / 2016</div>			
Mailing Address 1209 Fairmonth St. NW	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">3375.00</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Washington</td> <td style="width:17%; padding: 2px;">State DC</td> <td style="width:50%; padding: 2px;">Zip Code 20009</td> </tr> </table>		City Washington	State DC	Zip Code 20009
City Washington		State DC	Zip Code 20009	
Purpose of Expenditure Fliers Category/Type 004				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD, J., ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">07 / 25 / 2016</div>			
Mailing Address 1209 Fairmonth St. NW	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">2475.00</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Washington</td> <td style="width:17%; padding: 2px;">State DC</td> <td style="width:50%; padding: 2px;">Zip Code 20009</td> </tr> </table>		City Washington	State DC	Zip Code 20009
City Washington		State DC	Zip Code 20009	
Purpose of Expenditure Fliers Category/Type 004				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Rodham Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">5850.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

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

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
---	--

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1209 Fairmonth St. NW	Amount <input type="text"/>
City Washington State DC Zip Code 20009	Transaction ID : D592574
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD, J., ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1209 Fairmonth St. NW	Amount <input type="text"/>
City Washington State DC Zip Code 20009	Transaction ID : D592575
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose BLUNT, ROY, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate State: <u>MO</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 5875.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 5618.75
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , , [Electronically Filed] Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620583 </div>
---	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016
Mailing Address 1209 Fairmonth St. NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 3200.00 </div> Transaction ID : D592577 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 03 / 2016
City Washington State DC Zip Code 20009	
Purpose of Expenditure Fliers Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TOOMEY, PATRICK, JOSEPH, ,	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 7112.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016
Mailing Address 1209 Fairmonth St. NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 2575.00 </div> Transaction ID : D592578 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 03 / 2016
City Washington State DC Zip Code 20009	
Purpose of Expenditure Fliers Category/Type 004	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Rodham Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 5775.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00620583 </div>
---	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">07 / 25 / 2016</div>						
Mailing Address 1209 Fairmonth St. NW	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">3200.00</div>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20009</td> </tr> </table>		City	State	Zip Code	Washington	DC	20009
City		State	Zip Code				
Washington	DC	20009					
Purpose of Expenditure Fliers	Category/Type 004						
Name of Federal Candidate: MCGINTY, KATHLEEN, ALANA, ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: PA						
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) ▶ _____ <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">7112.50</div>						

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">07 / 25 / 2016</div>						
Mailing Address 1209 Fairmonth St. NW	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">2575.00</div>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20009</td> </tr> </table>		City	State	Zip Code	Washington	DC	20009
City		State	Zip Code				
Washington	DC	20009					
Purpose of Expenditure Fliers	Category/Type 004						
Name of Federal Candidate: FEINGOLD, RUSSELL, DANA, ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: WI						
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) ▶ _____ <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">5870.00</div>						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">5775.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, ,

[Electronically Filed]

Date

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

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620583 </div>
---	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016						
Mailing Address 1209 Fairmonth St. NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2937.50</div> Transaction ID : D592581 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 03 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20009</td> </tr> </table>		City	State	Zip Code	Washington	DC	20009
City		State	Zip Code				
Washington	DC	20009					
Purpose of Expenditure Fliers							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose KANDER, JASON, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>MO</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5875.00</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016						
Mailing Address 1209 Fairmonth St. NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3200.00</div> Transaction ID : D592582 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 03 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20009</td> </tr> </table>		City	State	Zip Code	Washington	DC	20009
City		State	Zip Code				
Washington	DC	20009					
Purpose of Expenditure Fliers							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Rodham Clinton, Hillary, , ,	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House District: _____ State: _____						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">182934.21</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">6137.50</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620583 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016
Mailing Address 1209 Fairmonth St. NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 3375.00 </div> Transaction ID : D592583 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 03 / 2016
City State Zip Code Washington DC 20009	
Purpose of Expenditure Fliers Category/Type 004	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Rodham Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 01 / 2016
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 240.00 </div> Transaction ID : D593768 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 01 / 2016
City State Zip Code Cheverly MD 20781	
Purpose of Expenditure Fliers Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD, J., ,	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 3375.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00620583 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 01 / 2016						
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 480.00 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City</td> <td style="width:33%; padding: 2px;">State</td> <td style="width:33%; padding: 2px;">Zip Code</td> </tr> <tr> <td style="padding: 2px;">Cheverly</td> <td style="padding: 2px;">MD</td> <td style="padding: 2px;">20781</td> </tr> </table>		City	State	Zip Code	Cheverly	MD	20781
City		State	Zip Code				
Cheverly	MD	20781					
Purpose of Expenditure Fliers	Category/Type 004						
Name of Federal Candidate: Ross, Deborah, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate <input type="checkbox"/> State: <u>NC</u>						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 2230.00 </div>							

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 01 / 2016						
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 240.00 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City</td> <td style="width:33%; padding: 2px;">State</td> <td style="width:33%; padding: 2px;">Zip Code</td> </tr> <tr> <td style="padding: 2px;">Cheverly</td> <td style="padding: 2px;">MD</td> <td style="padding: 2px;">20781</td> </tr> </table>		City	State	Zip Code	Cheverly	MD	20781
City		State	Zip Code				
Cheverly	MD	20781					
Purpose of Expenditure Fliers	Category/Type 004						
Name of Federal Candidate: Rodham Clinton, Hillary, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> District: _____ State: _____						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 182934.21 </div>							

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature King, Crystal, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00620583 </div>
---	---

Check if 24-hour report 48-hour report ➤ New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016						
Mailing Address 4801 Viewpoint Place	Amount 180.00 Transaction ID : D593842 Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City</td> <td style="width:33%; border-bottom: 1px solid black;">State</td> <td style="width:33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td>Cheverly</td> <td>MD</td> <td>20781</td> </tr> </table>		City	State	Zip Code	Cheverly	MD	20781
City		State	Zip Code				
Cheverly	MD	20781					
Purpose of Expenditure Fliers							
Name of Federal Candidate: Rodham Clinton, Hillary, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____						
Calendar Year-To-Date Per Election for Office Sought	182934.21 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 06 / 2016						
Mailing Address 4801 Viewpoint Place	Amount 120.00 Transaction ID : D606249 Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City</td> <td style="width:33%; border-bottom: 1px solid black;">State</td> <td style="width:33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td>Cheverly</td> <td>MD</td> <td>20781</td> </tr> </table>		City	State	Zip Code	Cheverly	MD	20781
City		State	Zip Code				
Cheverly	MD	20781					
Purpose of Expenditure Fliers							
Name of Federal Candidate: CORTEZ MASTO, CATHERINE, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: NV						
Calendar Year-To-Date Per Election for Office Sought	9112.50 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) TOTAL Independent Expenditures ▶	

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00620583 </div>
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Check if 24-hour report 48-hour report ➤ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 08 / 2016						
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 450.00 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City</td> <td style="width:33%; border-bottom: 1px solid black;">State</td> <td style="width:33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td>Cheverly</td> <td>MD</td> <td>20781</td> </tr> </table>		City	State	Zip Code	Cheverly	MD	20781
City		State	Zip Code				
Cheverly	MD	20781					
Purpose of Expenditure Non Federal Fliers	Category/Type 004						
Name of Federal Candidate: HARTMAN, CHRISTINA MARIE, M, MS.,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 16 State: PA						
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) ▶						
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 450.00 </div>	M M / D D / Y Y Y Y Y Y 09 / 08 / 2016						

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 08 / 2016						
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 360.00 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City</td> <td style="width:33%; border-bottom: 1px solid black;">State</td> <td style="width:33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td>Cheverly</td> <td>MD</td> <td>20781</td> </tr> </table>		City	State	Zip Code	Cheverly	MD	20781
City		State	Zip Code				
Cheverly	MD	20781					
Purpose of Expenditure Fliers	Category/Type 004						
Name of Federal Candidate: CORTEZ MASTO, CATHERINE, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: NV						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 9112.50 </div>	M M / D D / Y Y Y Y Y Y 09 / 08 / 2016						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature King, Crystal, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 27 / 2016

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/>
City Cheverly State MD Zip Code 20781	Transaction ID : D606251
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CORTEZ MASTO, CATHERINE, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 9112.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/>
City Cheverly State MD Zip Code 20781	Transaction ID : D606252
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CORTEZ MASTO, CATHERINE, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 9112.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/>
City Cheverly State MD Zip Code 20781	Transaction ID : D606253
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CORTEZ MASTO, CATHERINE, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NV
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 9112.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/>
City Cheverly State MD Zip Code 20781	Transaction ID : D597384
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: TRUMP, DONALD, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,
Signature

[Electronically Filed]

Date / / **10 / 27 / 2016**

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 4801 Viewpoint Place		Amount <input type="text"/>	
City Cheverly	State MD	Zip Code 20781	Transaction ID : D606255
Purpose of Expenditure Fliers		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Rodham Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 4801 Viewpoint Place		Amount <input type="text"/>	
City Cheverly	State MD	Zip Code 20781	Transaction ID : D606257
Purpose of Expenditure Fliers		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: TRUMP, DONALD, J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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King, Crystal, , ,

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620583 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 10 / 2016
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 11.25 </div> Transaction ID : D606259 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 10 / 2016
City State Zip Code Cheverly MD 20781	
Purpose of Expenditure Fliers Category/Type 004	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Rodham Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 10 / 2016
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 11.25 </div> Transaction ID : D606260 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 10 / 2016
City State Zip Code Cheverly MD 20781	
Purpose of Expenditure Fliers Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD, J., ,	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 0.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>

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King, Crystal, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/10/2016
Amount 180.00
Transaction ID: D606261
Date of Disbursement or Obligation 09/10/2016

Name of Federal Candidate: FEINGOLD, RUSSELL, DANA, Support
Office Sought: Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 5870.00
Disbursement For: General 2016

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/10/2016
Amount 292.50
Transaction ID: D606262
Date of Disbursement or Obligation 09/10/2016

Name of Federal Candidate: Rodham Clinton, Hillary, Support
Office Sought: President
Calendar Year-To-Date Per Election for Office Sought 182934.21
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date 10/27/2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620583 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 13 / 2016						
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 450.00 </div> Transaction ID : D597580 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 13 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Cheverly</td> <td>MD</td> <td>20781</td> </tr> </table>		City	State	Zip Code	Cheverly	MD	20781
City		State	Zip Code				
Cheverly	MD	20781					
Purpose of Expenditure Fliers							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose MURPHY, PATRICK, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> State: <u>FL</u>						
Calendar Year-To-Date Per Election for Office Sought 87388.34	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 13 / 2016						
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 180.00 </div> Transaction ID : D597581 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 13 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Cheverly</td> <td>MD</td> <td>20781</td> </tr> </table>		City	State	Zip Code	Cheverly	MD	20781
City		State	Zip Code				
Cheverly	MD	20781					
Purpose of Expenditure Fliers							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose NELSON, TOM, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>WI</u>						
Calendar Year-To-Date Per Election for Office Sought 1498.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 0.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 10 / 27 / 2016
 Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/>
City Cheverly State MD Zip Code 20781	Transaction ID : D606266
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Rodham Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/>
City Cheverly State MD Zip Code 20781	Transaction ID : D606267
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Rodham Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

/ /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/13/2016
Amount 150.00
Transaction ID : D606268
Date of Disbursement or Obligation 09/13/2016

Name of Federal Candidate: TRUMP, DONALD, J., , Support Oppose
Office Sought: President House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/14/2016
Amount 1080.00
Transaction ID : D597694
Date of Disbursement or Obligation 09/14/2016

Name of Federal Candidate: KIHUEN, RUBEN, , Support Oppose
Office Sought: House President Senate State: NV
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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King, Crystal, ,

[Electronically Filed]

Date

10/27/2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
---	---

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Mosaic <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/> 180.00
City Cheverly State MD Zip Code 20781	
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Transaction ID : D606269 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CORTEZ MASTO, CATHERINE, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 9112.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Mosaic <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/> 180.00
City Cheverly State MD Zip Code 20781	
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Transaction ID : D606270 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CORTEZ MASTO, CATHERINE, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 9112.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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King, Crystal, , , [Electronically Filed] Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Mosaic <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/>
City Cheverly State MD Zip Code 20781	Transaction ID : D59290
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Rodham Clinton, Hillary, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Mosaic <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/>
City Cheverly State MD Zip Code 20781	Transaction ID : D606272
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CORTEZ MASTO, CATHERINE, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 9112.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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King, Crystal, , ,

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Mosaic <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/>
City Cheverly State MD Zip Code 20781	Transaction ID : D606274
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CORTEZ MASTO, CATHERINE, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 9112.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Mosaic <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/>
City Cheverly State MD Zip Code 20781	Transaction ID : D599365
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: ROSEN, JACKY, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1560.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , , [Electronically Filed] Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 4801 Viewpoint Place			Amount <input type="text"/>		
City Cheverly	State MD	Zip Code 20781	Transaction ID : D59371		
Purpose of Expenditure Fliers		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: ROSEN, JACKY, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>03</u> State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Grassroots Campaigns, Inc.			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 186 Lincoln Street, First Floor			Amount <input type="text"/>		
City Boston	State MA	Zip Code 02111	Transaction ID : D599431		
Purpose of Expenditure Canvassing Services		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Rodham Clinton, Hillary, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

/ /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Grassroots Campaigns, Inc. Memo Item
Mailing Address 186 Lincoln Street, First Floor
City Boston State MA Zip Code 02111
Purpose of Expenditure Canvassing Services Category/Type 004
Date of Public Distribution/Dissemination 09/17/2016
Amount 77066.67
Transaction ID : D599432
Date of Disbursement or Obligation 09/17/2016

Name of Federal Candidate: MURPHY, PATRICK, , Support
Office Sought: Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 87388.34
Disbursement For: General 2016

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/16/2016
Amount 270.00
Transaction ID : D599651
Date of Disbursement or Obligation 09/19/2016

Name of Federal Candidate: MCGINTY, KATHLEEN, ALANA, , Support
Office Sought: Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 7112.50
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, ,

[Electronically Filed]

Date

10/27/2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620583 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on / / 	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination 09 / 19 / 2016
Mailing Address 4801 Viewpoint Place	Amount 270.00
City Cheverly State MD Zip Code 20781	Transaction ID : D599652 Date of Disbursement or Obligation 09 / 19 / 2016
Purpose of Expenditure Fliers Category/Type 004	Name of Federal Candidate: Rodham Clinton, Hillary, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination 09 / 20 / 2016
Mailing Address 4801 Viewpoint Place	Amount 600.00
City Cheverly State MD Zip Code 20781	Transaction ID : D599805 Date of Disbursement or Obligation 09 / 20 / 2016
Purpose of Expenditure Fliers Category/Type 004	Name of Federal Candidate: MURPHY, PATRICK, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 87388.34	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) TOTAL Independent Expenditures ▶	

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/18/2016
Amount 30.00
Transaction ID : D599924
Date of Disbursement or Obligation 09/21/2016

Name of Federal Candidate: TRUMP, DONALD, J., , Support Oppose
Office Sought: President House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/21/2016
Amount 90.00
Transaction ID : D599927
Date of Disbursement or Obligation 09/21/2016

Name of Federal Candidate: Rodham Clinton, Hillary, , Support Oppose
Office Sought: President House Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , [Electronically Filed] Date 10/27/2016
Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620583 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on <div style="display: flex; justify-content: space-between; margin-left: 100px;"> M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y </div>
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1440.00</div>
City State Zip Code Cheverly MD 20781	Transaction ID : D599928 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y </div>
Purpose of Expenditure Fliers	Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose KIHUEN, RUBEN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 04 State: NV
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">6420.00</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y </div>
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">180.00</div>
City State Zip Code Cheverly MD 20781	Transaction ID : D599930 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y </div>
Purpose of Expenditure Fliers	Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose MURPHY, PATRICK, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: FL
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">87388.34</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature <i>King, Crystal, , ,</i>	[Electronically Filed]	Date <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y </div>
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**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620583 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination 09 / 21 / 2016
Mailing Address 4801 Viewpoint Place	Amount 90.00
City State Zip Code Cheverly MD 20781	
Purpose of Expenditure Fliers Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD, J., ,	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination 09 / 21 / 2016
Mailing Address 4801 Viewpoint Place	Amount 630.00
City State Zip Code Cheverly MD 20781	
Purpose of Expenditure Fliers Category/Type 004	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose MURPHY, PATRICK, , ,	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 87388.34	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) TOTAL Independent Expenditures ▶	

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620583 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 21 / 2016						
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 30.00 </div> Transaction ID : D599933 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 21 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Cheverly</td> <td>MD</td> <td>20781</td> </tr> </table>		City	State	Zip Code	Cheverly	MD	20781
City		State	Zip Code				
Cheverly	MD	20781					
Purpose of Expenditure Fliers							
Name of Federal Candidate: Rodham Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <input type="checkbox"/> Oppose						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ <div style="border: 1px solid black; padding: 2px; text-align: right; width: 200px; margin: 0 auto;"> M M / D D / Y Y Y Y Y Y 182934.21 </div>						

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 10 / 2016						
Mailing Address 1209 Fairmonth St. NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 1750.00 </div> Transaction ID : D597382 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 22 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20009</td> </tr> </table>		City	State	Zip Code	Washington	DC	20009
City		State	Zip Code				
Washington	DC	20009					
Purpose of Expenditure Fliers							
Name of Federal Candidate: TRUMP, DONALD, J., ,	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <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 2016 <input type="checkbox"/> Other (specify) ▶ _____ <div style="border: 1px solid black; padding: 2px; text-align: right; width: 200px; margin: 0 auto;"> M M / D D / Y Y Y Y Y Y 182934.21 </div>						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 1750.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature King, Crystal, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 10 / 27 / 2016

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00620583 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 10 / 2016			
Mailing Address 1209 Fairmonth St. NW	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 1750.00 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Washington</td> <td style="width:17%; padding: 2px;">State DC</td> <td style="width:50%; padding: 2px;">Zip Code 20009</td> </tr> </table>		City Washington	State DC	Zip Code 20009
City Washington		State DC	Zip Code 20009	
Purpose of Expenditure Fliers				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Ross, Deborah, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>NC</u>			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 2230.00 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 10 / 2016			
Mailing Address 1209 Fairmonth St. NW	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 1750.00 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Washington</td> <td style="width:17%; padding: 2px;">State DC</td> <td style="width:50%; padding: 2px;">Zip Code 20009</td> </tr> </table>		City Washington	State DC	Zip Code 20009
City Washington		State DC	Zip Code 20009	
Purpose of Expenditure Fliers				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Rodham Clinton, Hillary, , ,	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 182934.21 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 3500.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Print Logistics <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1700 L Street	Amount <input type="text"/>
City Sacramento State CA Zip Code 95814	28798.37
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Transaction ID : D597519 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: TRUMP, DONALD, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Mosaic <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/>
City Cheverly State MD Zip Code 20781	22.50
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Transaction ID : D600158 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: MURPHY, PATRICK, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 87388.34	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 28798.37
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

/ /

Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Mosaic <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/> 7.50 Transaction ID : D608481 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Cheverly MD 20781	
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	
Name of Federal Candidate: Rodham Clinton, Hillary, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Mosaic <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/> 7.50 Transaction ID : D608482 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Cheverly MD 20781	
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	
Name of Federal Candidate: TRUMP, DONALD, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , , [Electronically Filed] Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
---	--

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/>
City Cheverly State MD Zip Code 20781	Transaction ID : D608483
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Rodham Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/>
City Cheverly State MD Zip Code 20781	Transaction ID : D608484
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD, J., ,	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , , [Electronically Filed] Date / /
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/19/2016
Amount 742.50
Transaction ID: D600229
Date of Disbursement or Obligation 09/23/2016
Name of Federal Candidate: NELSON, TOM, , Support Office Sought: House District: 08 State: WI
Calendar Year-To-Date Per Election for Office Sought 1498.50
Disbursement For: General 2016

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/23/2016
Amount 15.00
Transaction ID: D606287
Date of Disbursement or Obligation 09/23/2016
Name of Federal Candidate: Rodham Clinton, Hillary, , Support Office Sought: President State:
Calendar Year-To-Date Per Election for Office Sought 182934.21
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, ,

[Electronically Filed]

Date

10/27/2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 4801 Viewpoint Place			Amount <input type="text"/>		
City Cheverly	State MD	Zip Code 20781	Transaction ID : D606289		
Purpose of Expenditure Fliers		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Rodham Clinton, Hillary, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		
		182934.21	2016		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 4801 Viewpoint Place			Amount <input type="text"/>		
City Cheverly	State MD	Zip Code 20781	Transaction ID : D606291		
Purpose of Expenditure Fliers		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: MCGINTY, KATHLEEN, ALANA, ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>PA</u>		
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		
		7112.50	2016		

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 4801 Viewpoint Place			Amount <input type="text"/>		
City Cheverly	State MD	Zip Code 20781	Transaction ID : D606292		
Purpose of Expenditure Fliers		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Rodham Clinton, Hillary, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 4801 Viewpoint Place			Amount <input type="text"/>		
City Cheverly	State MD	Zip Code 20781	Transaction ID : D606295		
Purpose of Expenditure Fliers		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Rodham Clinton, Hillary, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620583 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 23 / 2016		
Mailing Address 4801 Viewpoint Place			Amount M M / D D / Y Y Y Y Y Y 7.50		
City Cheverly	State MD	Zip Code 20781			
Purpose of Expenditure Fliers		Category/ Type 004	Transaction ID : D606296 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 23 / 2016		
Name of Federal Candidate: TRUMP, DONALD, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 182934.21			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 23 / 2016		
Mailing Address 4801 Viewpoint Place			Amount M M / D D / Y Y Y Y Y Y 720.00		
City Cheverly	State MD	Zip Code 20781			
Purpose of Expenditure Fliers		Category/ Type 004	Transaction ID : D606298 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 23 / 2016		
Name of Federal Candidate: CORTEZ MASTO, CATHERINE, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 9112.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	M M / D D / Y Y Y Y Y Y 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	M M / D D / Y Y Y Y Y Y _____
(a) TOTAL Independent Expenditures ▶	M M / D D / Y Y Y Y Y Y _____

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/23/2016
Amount 720.00
Transaction ID : D606299
Date of Disbursement or Obligation 09/23/2016

Name of Federal Candidate: CORTEZ MASTO, CATHERINE, , ,
Support Oppose
Office Sought: House District:
President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 9112.50
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/24/2016
Amount 90.00
Transaction ID : D600375
Date of Disbursement or Obligation 09/24/2016

Name of Federal Candidate: MCGINTY, KATHLEEN, ALANA, ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 7112.50
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

10/27/2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/24/2016
Amount 90.00
Transaction ID : D600380
Date of Disbursement or Obligation 09/24/2016

Name of Federal Candidate: Rodham Clinton, Hillary, , , Support
Office Sought: President
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 182934.21

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/22/2016
Amount 540.00
Transaction ID : D600383
Date of Disbursement or Obligation 09/24/2016

Name of Federal Candidate: MURPHY, PATRICK, , , Support
Office Sought: Senate
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 87388.34

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature King, Crystal, , , [Electronically Filed] Date 10/27/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/24/2016
Amount 22.50
Transaction ID: D606300
Date of Disbursement or Obligation 09/24/2016

Name of Federal Candidate: MURPHY, PATRICK, , Support
Office Sought: Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 87388.34
Disbursement For: General 2016

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/24/2016
Amount 90.00
Transaction ID: D606302
Date of Disbursement or Obligation 09/24/2016

Name of Federal Candidate: Rodham Clinton, Hillary, , Support
Office Sought: President
Calendar Year-To-Date Per Election for Office Sought 182934.21
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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King, Crystal, ,

[Electronically Filed]

Date

10/27/2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00620583 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 19 / 2016						
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 60.00 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City</td> <td style="width:33%; padding: 2px;">State</td> <td style="width:33%; padding: 2px;">Zip Code</td> </tr> <tr> <td style="padding: 2px;">Cheverly</td> <td style="padding: 2px;">MD</td> <td style="padding: 2px;">20781</td> </tr> </table>		City	State	Zip Code	Cheverly	MD	20781
City		State	Zip Code				
Cheverly	MD	20781					
Purpose of Expenditure Fliers	Category/Type 004						
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD, J., ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____						
Calendar Year-To-Date Per Election for Office Sought 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 26 / 2016						
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 60.00 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City</td> <td style="width:33%; padding: 2px;">State</td> <td style="width:33%; padding: 2px;">Zip Code</td> </tr> <tr> <td style="padding: 2px;">Cheverly</td> <td style="padding: 2px;">MD</td> <td style="padding: 2px;">20781</td> </tr> </table>		City	State	Zip Code	Cheverly	MD	20781
City		State	Zip Code				
Cheverly	MD	20781					
Purpose of Expenditure Fliers	Category/Type 004						
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose MCGINTY, KATHLEEN, ALANA, ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: PA						
Calendar Year-To-Date Per Election for Office Sought 7112.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div>

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King, Crystal, , ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 4801 Viewpoint Place		Amount <input type="text"/>	
City Cheverly	State MD	Zip Code 20781	Transaction ID : D600541
Purpose of Expenditure Fliers		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Rodham Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Mack-Sumner Communications, LLC.		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2001 N. Beauregard Street Suite 420		Amount <input type="text"/>	
City Alexandria	State VA	Zip Code 22311	Transaction ID : D599436
Purpose of Expenditure Printing - Canvassing Literature		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Rodham Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620583 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Mack-Sumner Communications, LLC.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 17 / 2016
Mailing Address 2001 N. Beauregard Street Suite 420			Amount M M / D D / Y Y Y Y Y Y 1906.67
City Alexandria	State VA	Zip Code 22311	Transaction ID : D599437 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 27 / 2016
Purpose of Expenditure Printing - Canvassing Literature		Category/Type 004	Name of Federal Candidate: MURPHY, PATRICK, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate: MURPHY, PATRICK, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶	District: _____ State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 87388.34		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Petel & Co.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 30 / 2016
Mailing Address 1209 Fairmonth St. NW			Amount M M / D D / Y Y Y Y Y Y 39150.00
City Washington	State DC	Zip Code 20009	Transaction ID : D601214 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 27 / 2016
Purpose of Expenditure Direct Mail		Category/Type 004	Name of Federal Candidate: Rodham Clinton, Hillary, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate: Rodham Clinton, Hillary, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶	District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 182934.21		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	M M / D D / Y Y Y Y Y Y 41056.67
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	M M / D D / Y Y Y Y Y Y
(a) TOTAL Independent Expenditures ▶	M M / D D / Y Y Y Y Y Y

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 08/11/2016
Amount 360.00
Transaction ID : D593100
Date of Disbursement or Obligation 09/28/2016

Name of Federal Candidate: NELSON, TOM, , ,
Support Oppose
Office Sought: House District: 08
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 1498.50
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 08/26/2016
Amount 36.00
Transaction ID : D593769
Date of Disbursement or Obligation 09/28/2016

Name of Federal Candidate: NELSON, TOM, , ,
Support Oppose
Office Sought: House District: 08
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 1498.50
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 396.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

10/27/2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 08/26/2016
Amount 90.00
Transaction ID : D593770
Date of Disbursement or Obligation 09/28/2016

Name of Federal Candidate: FEINGOLD, RUSSELL, DANA,
Support Oppose
Office Sought: House District:
President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 5870.00
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 08/31/2016
Amount 225.00
Transaction ID : D593772
Date of Disbursement or Obligation 09/28/2016

Name of Federal Candidate: MCGINTY, KATHLEEN, ALANA,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 7112.50
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 315.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, ,

[Electronically Filed]

Date

10/27/2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Mosaic <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> 08 / <input type="text"/> 31 / <input type="text"/> 2016
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/> 225.00
City Cheverly State MD Zip Code 20781	
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Transaction ID : D593774 Date of Disbursement or Obligation <input type="text"/> 09 / <input type="text"/> 28 / <input type="text"/> 2016

Name of Federal Candidate: Rodham Clinton, Hillary, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Mosaic <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> 09 / <input type="text"/> 25 / <input type="text"/> 2016
Mailing Address 4801 Viewpoint Place	Amount <input type="text"/> 60.00
City Cheverly State MD Zip Code 20781	
Purpose of Expenditure Fliers Category/Type <input type="text"/> 004	Transaction ID : D600801 Date of Disbursement or Obligation <input type="text"/> 09 / <input type="text"/> 28 / <input type="text"/> 2016

Name of Federal Candidate: Rodham Clinton, Hillary, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 182934.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 225.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

Signature

[Electronically Filed]

Date

10 / 27 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/25/2016
Amount 120.00
Transaction ID : D600802
Date of Disbursement or Obligation 09/28/2016

Name of Federal Candidate: MURPHY, PATRICK, , Support
Office Sought: Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 87388.34
Disbursement For: General 2016

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/28/2016
Amount 60.00
Transaction ID : D600803
Date of Disbursement or Obligation 09/28/2016

Name of Federal Candidate: TRUMP, DONALD, J., , Oppose
Office Sought: President
Calendar Year-To-Date Per Election for Office Sought 182934.21
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, ,

[Electronically Filed]

Date

10/27/2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620583 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 12 / 2016						
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">22.50</div> Transaction ID : D605873 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 28 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Cheverly</td> <td>MD</td> <td>20781</td> </tr> </table>		City	State	Zip Code	Cheverly	MD	20781
City		State	Zip Code				
Cheverly	MD	20781					
Purpose of Expenditure Fliers							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Van Stippen, Bryan, , ,	Office Sought: <input type="checkbox"/> House District: <u>12</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WI</u>						
Calendar Year-To-Date Per Election for Office Sought 22.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 13 / 2016						
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">660.00</div> Transaction ID : D605874 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 28 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Cheverly</td> <td>MD</td> <td>20781</td> </tr> </table>		City	State	Zip Code	Cheverly	MD	20781
City		State	Zip Code				
Cheverly	MD	20781					
Purpose of Expenditure Fliers							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose ROSEN, JACKY, , ,	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>						
Calendar Year-To-Date Per Election for Office Sought 1560.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">682.50</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature King, Crystal, , ,

 [Electronically Filed]

 Date M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 08/25/2016
Amount 90.00
Transaction ID : D605875
Date of Disbursement or Obligation 09/28/2016

Name of Federal Candidate: FEINGOLD, RUSSELL, DANA,
Support Oppose
Office Sought: House Senate WI
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 08/25/2016
Amount 270.00
Transaction ID : D605876
Date of Disbursement or Obligation 09/28/2016

Name of Federal Candidate: FEINGOLD, RUSSELL, DANA,
Support Oppose
Office Sought: House Senate WI
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 360.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, ,

[Electronically Filed]

Date

10/27/2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620583 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> 08 / 30 / 2016 </div>			
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 90.00 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Cheverly</td> <td style="width:17%; padding: 2px;">State MD</td> <td style="width:50%; padding: 2px;">Zip Code 20781</td> </tr> </table>		City Cheverly	State MD	Zip Code 20781
City Cheverly		State MD	Zip Code 20781	
Purpose of Expenditure Fliers	Category/Type 004			
Name of Federal Candidate: FEINGOLD, RUSSELL, DANA, ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WI			
Calendar Year-To-Date Per Election for Office Sought 5870.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Mosaic	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> 09 / 30 / 2016 </div>			
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 60.00 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Cheverly</td> <td style="width:17%; padding: 2px;">State MD</td> <td style="width:50%; padding: 2px;">Zip Code 20781</td> </tr> </table>		City Cheverly	State MD	Zip Code 20781
City Cheverly		State MD	Zip Code 20781	
Purpose of Expenditure Fliers	Category/Type 004			
Name of Federal Candidate: MCGINTY, KATHLEEN, ALANA, ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA			
Calendar Year-To-Date Per Election for Office Sought 7112.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 90.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date 10 / 27 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/30/2016
Amount 360.00
Transaction ID: D600906
Date of Disbursement or Obligation 09/30/2016

Name of Federal Candidate: MURPHY, PATRICK, , Support
Office Sought: Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 87388.34
Disbursement For: General 2016

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/30/2016
Amount 420.00
Transaction ID: D600907
Date of Disbursement or Obligation 09/30/2016

Name of Federal Candidate: KIHUEN, RUBEN, , Support
Office Sought: House District: 04 State: NV
Calendar Year-To-Date Per Election for Office Sought 6420.00
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature King, Crystal, , [Electronically Filed] Date 10/27/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/27/2016
Amount 1440.00
Transaction ID: D600911
Date of Disbursement or Obligation 09/30/2016

Name of Federal Candidate: KIHUEN, RUBEN, ,
Support Oppose
Office Sought: House District: 04
President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 6420.00
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/30/2016
Amount 540.00
Transaction ID: D606303
Date of Disbursement or Obligation 09/30/2016

Name of Federal Candidate: MURPHY, PATRICK, ,
Support Oppose
Office Sought: House District:
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 87388.34
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , [Electronically Filed] Date 10/27/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/30/2016
Amount 720.00
Transaction ID: D606304
Date of Disbursement or Obligation 09/30/2016
Name of Federal Candidate: KIHUEN, RUBEN, , , Support House District: 04 State: NV
Calendar Year-To-Date Per Election for Office Sought 6420.00
Disbursement For: General 2016

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/30/2016
Amount 720.00
Transaction ID: D606305
Date of Disbursement or Obligation 09/30/2016
Name of Federal Candidate: KIHUEN, RUBEN, , , Support House District: 04 State: NV
Calendar Year-To-Date Per Election for Office Sought 6420.00
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

[Electronically Filed]

Date

10/27/2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/30/2016
Amount 450.00
Transaction ID: D608475
Date of Disbursement or Obligation 09/30/2016

Name of Federal Candidate: Rodham Clinton, Hillary, , , Support Oppose
Office Sought: House District: Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/30/2016
Amount 450.00
Transaction ID: D608476
Date of Disbursement or Obligation 09/30/2016

Name of Federal Candidate: TRUMP, DONALD, J., , Support Oppose
Office Sought: House District: Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , , [Electronically Filed] Date 10/27/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Working America Coalition
FEC IDENTIFICATION NUMBER C C00620583

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic Memo Item
Mailing Address 4801 Viewpoint Place
City Cheverly State MD Zip Code 20781
Purpose of Expenditure Fliers Category/Type 004
Date of Public Distribution/Dissemination 09/30/2016
Amount 60.00
Transaction ID: D608493
Date of Disbursement or Obligation 09/30/2016

Name of Federal Candidate: Rodham Clinton, Hillary, , Support
Office Sought: President
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 182934.21

Full Name of Payee Memo Item
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate: Support
Office Sought:
Disbursement For:
Calendar Year-To-Date Per Election for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures 142180.21

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, ,

[Electronically Filed]

Date

10/27/2016

Signature