

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>WORKING FAMILIES OF ALASKA</b>			3. FEC Identification Number <b>C C90012402</b>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2501 COMMERCIAL DR			
(c) City, State and ZIP Code ANCHORAGE AK 99501			
2. Occupation and Name of Employer (for Individual Filers Only)			

4. TYPE OF REPORT (check appropriate boxes):

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

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

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

FROM 

M M	/	D D	/	Y Y Y Y
07		01		2023

THROUGH 

M M	/	D D	/	Y Y Y Y
09		30		2023

6. TOTAL CONTRIBUTIONS.....

.00
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7. TOTAL INDEPENDENT EXPENDITURES .....

.00
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Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

**TYPE OR PRINT NAME OF PERSON COMPLETING FORM**

**SIGNATURE**

**DATE**

Merrick, Augustine, , , II

Merrick, Augustine, , , II

10/13/2023

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