

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.

CAMPAIGN FOR WORKING FAMILIES

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

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 / / through / /

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

Type or Print Name of Treasurer Dorie Velezis

Signature of Treasurer Dorie Velezis [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CAMPAIGN FOR WORKING FAMILIES

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="2014"/>	<input type="text" value="776204.10"/>	<input type="text" value="776204.10"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="618258.90"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="16944.52"/>	<input type="text" value="178727.27"/>
(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="635203.42"/>	<input type="text" value="954931.37"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="30735.34"/>	<input type="text" value="350463.29"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="604468.08"/>	<input type="text" value="604468.08"/>
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="6300.38"/>	

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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From: M M / D D / Y Y Y Y 08 / 01 / 2014 To: M M / D D / Y Y Y Y 08 / 31 / 2014

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).....	14983.01	118547.01
(ii) Unitemized	1947.87	59804.79
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	16930.88	178351.80
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	16930.88	178351.80
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.).....	13.64	375.47
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))..... ▶	16944.52	178727.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	16944.52	178727.27

DETAILED SUMMARY PAGE
of Disbursements

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	28235.34	295328.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	28235.34	295328.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	52500.00
24. Independent Expenditures (use Schedule E)	0.00	1625.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	10.00
(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	10.00
29. Other Disbursements	0.00	1000.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	30735.34	350463.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30735.34	350463.29

DETAILED SUMMARY PAGE
of Disbursements

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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)	16930.88	178351.80
34. Total Contribution Refunds (from Line 28(d))	0.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16930.88	178341.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	28235.34	295328.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	28235.34	295328.29

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

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

FOR LINE NUMBER: PAGE 6 OF 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
CAMPAIGN FOR WORKING FAMILIES

A. MR CHARLES D AYRES
 Full Name (Last, First, Middle Initial)
 Mailing Address 4911 CASA ORO DR
 City State Zip Code
 YORBA LINDA CA 92886
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 08 / 2014
Transaction ID : SA11AI.11702
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. DAVID BAIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1000 PECAN DR
 City State Zip Code
 MCKINNEY TX 75069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CORWIN ENGINEERING INCORPORATED ENGINEER
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 05 / 2014
Transaction ID : SA11AI.11669
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

C. MR DAVID J BATLUCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 17 MULLIGAN DR
 City State Zip Code
 READING PA 19606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HAVEN BEHAVIORAL HOSPITAL OF EASTER PHYSICIAN
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 08 / 2014
Transaction ID : SA11AI.11627
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11702

0103804-0000081

Form/Schedule: SA11AI

Transaction ID: SA11AI.11669

0104630-0000046

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11627

0002355-0000005

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: PAGE 9 OF 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. DR GARY R BISHOP
 Full Name (Last, First, Middle Initial)
 Mailing Address 15144 LARRY ST
 City POWAY State CA Zip Code 92064
 FEC ID number of contributing federal political committee. C
 Name of Employer RIVERSIDE COUNTY Occupation PHARMACIST
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2014
Transaction ID : SA11Al.11696
 Amount of Each Receipt this Period
 35.00
 CONTRIBUTION

B. MR TERRY O BRISTOL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1304 DUFF DR
 STE 2 OFFICE 5
 City FORT COLLINS State CO Zip Code 80524
 FEC ID number of contributing federal political committee. C
 Name of Employer 344E FOOTHILLS PARKWAY FC Occupation ASSET MGR
 COLORADO
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2014
Transaction ID : SA11Al.11686
 Amount of Each Receipt this Period
 38.00
 CONTRIBUTION

C. MR WILLIAM P BUCK JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 2084 BROOK HIGHLAND RDG
 City BIRMINGHAM State AL Zip Code 35242
 FEC ID number of contributing federal political committee. C
 Name of Employer UNIVERSITY OF ALABAMA Occupation MOM
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2014
Transaction ID : SA11Al.11639
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 173.00
TOTAL This Period (last page this line number only)..... ▶

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11696

0009108-0000073

Form/Schedule: SA11AI

Transaction ID: SA11AI.11686

0024811-0000064

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11639

0101854-0000017

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 12 OF 49
	<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)
CAMPAIGN FOR WORKING FAMILIES

A. MR CHARLES DAN CHENOWETH
 Full Name (Last, First, Middle Initial)
 Mailing Address 5515 W RICHEY ROAD
 City HOUSTON State TX Zip Code 77066
 FEC ID number of contributing federal political committee. C
 Name of Employer TWSCO Occupation CHAIRMAN
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014
Transaction ID : SA11AI.11676
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. MR CRAIG W EGLOFF
 Full Name (Last, First, Middle Initial)
 Mailing Address 27001 HIGHWAY 128
 City YORKVILLE State CA Zip Code 95494
 FEC ID number of contributing federal political committee. C
 Name of Employer JAYMES & JAYMES Occupation INSURANCE BROKER
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2014
Transaction ID : SA11AI.11709
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

C. MR FRANCIS L FRIEND
 Full Name (Last, First, Middle Initial)
 Mailing Address 2125 LUANN LN APT 6
 City MADISON State WI Zip Code 53713
 FEC ID number of contributing federal political committee. C
 Name of Employer SELF Occupation CONSULTANT
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 05 / 2014
Transaction ID : SA11AI.11656
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11676

0111458-0000052

Form/Schedule: SA11AI

Transaction ID: SA11AI.11709

0101847-0000088

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11656

0100234-0000034

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 15 OF 49
	<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)
CAMPAIGN FOR WORKING FAMILIES

A. MR JAMES FULLMER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2552 WALNUT AVE STE 230
 City TUSTIN State CA Zip Code 92780
 FEC ID number of contributing federal political committee. C
 Name of Employer SELF Occupation REAL ESTATE
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014
Transaction ID : SA11AI.11700
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. JOAN FULLMER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2552 WALNUT AVENUE SUITE 230
 City TUSTIN State CA Zip Code 92780
 FEC ID number of contributing federal political committee. C
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014
Transaction ID : SA11AI.11715
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. MR RONALD J GILBERT
 Full Name (Last, First, Middle Initial)
 Mailing Address 181 ALBEVANNA LANE
 City SCOTTSVILLE State VA Zip Code 24590
 FEC ID number of contributing federal political committee. C
 Name of Employer INFO REQUESTED- NOT RECD Occupation INFO REQUESTED- NOT RECD
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2014
Transaction ID : SA11AI.11629
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5250.00
TOTAL This Period (last page this line number only).....▶	

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11700

0106483-0000077

Form/Schedule: SA11AI

Transaction ID: SA11AI.11629

0111459-0000006

**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 49
(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)
CAMPAIGN FOR WORKING FAMILIES

A. MRS PHYLLIS L GUNTER
Full Name (Last, First, Middle Initial)
Mailing Address 12939 JULINGTON RIDGE DR E
City JACKSONVILLE State FL Zip Code 32258
FEC ID number of contributing federal political committee. C
Name of Employer RETIRED Occupation RETIRED
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 04 / 2014
Transaction ID : SA11AI.11635
Amount of Each Receipt this Period 30.00
CONTRIBUTION

B. MR CARL W GUSTKE
Full Name (Last, First, Middle Initial)
Mailing Address 233 STATON RD
City CABOT State AR Zip Code 72023
FEC ID number of contributing federal political committee. C
Name of Employer FEDERAL EX - (WIFE) REBSAMEN R. H. Occupation PILOT - WIFE DEBORAH-RN
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 05 / 2014
Transaction ID : SA11AI.11667
Amount of Each Receipt this Period 50.00
CONTRIBUTION

C. JACQUELINE HAMILTON
Full Name (Last, First, Middle Initial)
Mailing Address 345 W. MEATS
City ORANGE State CA Zip Code 92865
FEC ID number of contributing federal political committee. C
Name of Employer HOUSEWIFE Occupation HOUSEWIFE
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 22 / 2014
Transaction ID : SA11AI.11701
Amount of Each Receipt this Period 5000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5080.00
TOTAL This Period (last page this line number only)..... ▶

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11635

0107460-0000013

Form/Schedule: SA11AI

Transaction ID: SA11AI.11667

0022519-0000044

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11701

0009250-0000079

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 20 OF 49
	<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)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial) A. MR MARK A HOLMES		Date of Receipt
Mailing Address 6035 S VIVIAN ST		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code LITTLETON CO 80127		Transaction ID : SA11AI.11683
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="2000.00"/>
Name of Employer Occupation TERUMO BCT QUALITY		CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>

Full Name (Last, First, Middle Initial) B. DR JOHN D KEISLING		Date of Receipt
Mailing Address 35 ERICA LN		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City State Zip Code BELEN NM 87002		Transaction ID : SA11AI.11692
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="40.00"/>
Name of Employer Occupation SAIC SCIENTIST		CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="320.00"/>

Full Name (Last, First, Middle Initial) C. MR HENDRIK KERKSTRA		Date of Receipt
Mailing Address 1224 ATWATER ST		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City State Zip Code CHULA VISTA CA 91913		Transaction ID : SA11AI.11695
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="60.00"/>
Name of Employer Occupation RETIRED RETIRED		CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2100.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11683

0008108-0000060

Form/Schedule: SA11AI

Transaction ID: SA11AI.11692

0100128-0000069

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11695

0103362-0000072

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: PAGE 23 OF 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR THOMAS J KUK
 Full Name (Last, First, Middle Initial)
 Mailing Address 32265 WEEPING WILLOW ST
 City State Zip Code
 TRABUCO CANYON CA 92679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 440.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2014
Transaction ID : SA11AI.11698
 Amount of Each Receipt this Period
 55.00
 CONTRIBUTION

B. MRS BONNIE MCCONNELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 6960 CITRUS DRIVE
 City State Zip Code
 SEMINOLE FL 33772
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PUBLIC SCHOOL SYSTEM TEACHER
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 785.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2014
Transaction ID : SA11AI.11637
 Amount of Each Receipt this Period
 35.00
 CONTRIBUTION

C. MRS MAE L MCKINLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 515 11TH AVENUE NE
 City State Zip Code
 MINOT ND 58703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2014
Transaction ID : SA11AI.11661
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
TOTAL This Period (last page this line number only)..... ▶

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11698

0015893-0000075

Form/Schedule: SA11AI

Transaction ID: SA11AI.11637

0108135-0000015

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11661

0101794-0000039

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 26 OF 49
	<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)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial) A. MR EDWARD M NICHOLS		Date of Receipt
Mailing Address 500 SUMMIT LAKE DR STE 120		<input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
VALHALLA	NY	10595
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.11623
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF	FUSION FINANCIAL GROUP	<input type="text" value="50.00"/>
Receipt For: 2014	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR MIKE PACK		Date of Receipt
Mailing Address 2741 DE LA BRIANDAIS CT		<input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
PINOLE	CA	94564
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.11708
Name of Employer	Occupation	Amount of Each Receipt this Period
KAISER PERMANENTE	SYSTEM ARCHITECT	<input type="text" value="100.00"/>
Receipt For: 2014	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. BRIAN R PARKER		Date of Receipt
Mailing Address 2514 MEADOW DR		<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
ZEELAND	MI	49464
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.11652
Name of Employer	Occupation	Amount of Each Receipt this Period
GENTEX CORPORATION	ENGINEER	<input type="text" value="185.00"/>
Receipt For: 2014	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="370.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="335.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11623

0108914-0000002

Form/Schedule: SA11AI

Transaction ID: SA11AI.11708

0012630-0000087

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11652

0021018-0000030

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: PAGE 29 OF 49
(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)
CAMPAIGN FOR WORKING FAMILIES

A. MR ROBERT PASSWATERS
Full Name (Last, First, Middle Initial)
Mailing Address 160 WILLOW PL S
City BROOMFIELD State CO Zip Code 80020
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 19 / 2014
Transaction ID : SA11AI.11682
Amount of Each Receipt this Period
75.00
CONTRIBUTION

B. MR RICK B SKINNER
Full Name (Last, First, Middle Initial)
Mailing Address 19111 SCENIC HIGHWAY 98
City FAIRHOPE State AL Zip Code 36532
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED ENGINEER
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 200.03

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 08 / 2014
Transaction ID : SA11AI.11642
Amount of Each Receipt this Period
50.01
CONTRIBUTION

C. MRS JOY SNYDER
Full Name (Last, First, Middle Initial)
Mailing Address 8328 JOHNSON CIRCLE
City MINNEAPOLIS State MN Zip Code 55437
FEC ID number of contributing federal political committee. **C**
Name of Employer INFO REQUESTED- NOT RECD Occupation INFO REQUESTED- NOT RECD
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 22 / 2014
Transaction ID : SA11AI.11658
Amount of Each Receipt this Period
50.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.01
TOTAL This Period (last page this line number only)..... ▶

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11682

0111226-0000059

Form/Schedule: SA11AI

Transaction ID: SA11AI.11642

0012916-0000020

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11658

0111315-0000036

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 32 OF 49
	<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)
CAMPAIGN FOR WORKING FAMILIES

A. MR MARK SWISHER
Full Name (Last, First, Middle Initial)

Mailing Address 24902 N POINT PLACE

City KATY State TX Zip Code 77494

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

Name of Employer AVIARA ENERGY CORPORATION Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 05 / 2014
Transaction ID : SA11Al.11677

Amount of Each Receipt this Period 50.00

CONTRIBUTION

B. MR STEVEN E WINTER
Full Name (Last, First, Middle Initial)

Mailing Address 2104 BENTHAM WAY

City YUKON State OK Zip Code 73099

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

Name of Employer FAA / MUSTANG PUBLIC SCHOOLS Occupation RETIRED AVIATION SAFETY INSPECTOR /

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 15 / 2014
Transaction ID : SA11Al.11668

Amount of Each Receipt this Period 100.00

CONTRIBUTION

C. MRS JUNE L ZEIGLER
Full Name (Last, First, Middle Initial)

Mailing Address 739 E 2ND NORTH ST UNIT 363

City MORRISTOWN State TN Zip Code 37814

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 15 / 2014
Transaction ID : SA11Al.11643

Amount of Each Receipt this Period 30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	14983.01

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11677

0048257-0000054

Form/Schedule: SA11AI

Transaction ID: SA11AI.11668

0007481-0000045

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.11643

0098488-0000021

Form/Schedule:

Transaction ID:

**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"/> 24	<input type="checkbox"/> 25	<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)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. 1st VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	04	/	2014

Transaction ID : SB21B.11719

Amount of Each Disbursement this Period

56.13

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address P.O. BOX 299051

City State Zip Code
FT. LAUDERDALE FL 33329

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	01	/	2014

Transaction ID : SB21B.11717

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P.O. BOX 299051

City State Zip Code
FT. LAUDERDALE FL 33329

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	05	/	2014

Transaction ID : SB21B.11720

Amount of Each Disbursement this Period

1.55

SUBTOTAL of Disbursements This Page (optional)..... ▶

65.63

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"/> 24	<input type="checkbox"/> 25	<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)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City SAN FRANCISCO State CA Zip Code 94128

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : SB21B.11718

Amount of Each Disbursement this Period

36.81

Full Name (Last, First, Middle Initial)

B. GARY BAUER

Mailing Address 2800 S SHIRLINGTON RD #930

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
PAC CONSULTING POLITICAL & ADMIN

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 28 / 2014

Transaction ID : SB21B.11750

Amount of Each Disbursement this Period

11750.00

Full Name (Last, First, Middle Initial)

C. BB&T

Mailing Address 2800 S Quincy St.

City Arlington State VA Zip Code 22206

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2014

Transaction ID : SB21B.11721

Amount of Each Disbursement this Period

138.87

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

11925.68

**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"/> 24	<input type="checkbox"/> 25	<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)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 2800 S Quincy St.

City State Zip Code
Arlington VA 22206

Purpose of Disbursement
BANK FEES

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
08	/	21	/	2014

Transaction ID : SB21B.11722

Amount of Each Disbursement this Period

125.03

B. BB&T

Full Name (Last, First, Middle Initial)

Mailing Address 2800 S Quincy St.

City State Zip Code
Arlington VA 22206

Purpose of Disbursement
BANK FEES

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
08	/	31	/	2014

Transaction ID : SB21B.11716

Amount of Each Disbursement this Period

10.50

C. CASTLE STRATEGIES

Full Name (Last, First, Middle Initial)

Mailing Address 11105 HARROWFIELD ROAD

City State Zip Code
CHARLOTTE NC 28226

Purpose of Disbursement
PAC SOCIAL MEDIA CONSULTING

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
08	/	08	/	2014

Transaction ID : SB21B.11723

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

2635.53

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"/> 24	<input type="checkbox"/> 25	<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)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. CHOI COMPANIES

Mailing Address 5999 STEVENSON AVE #310

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement
RENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : SB21B.11737

Amount of Each Disbursement this Period

3125.67

Full Name (Last, First, Middle Initial)

B. CITY OF ALEXANDRIA

Mailing Address P.O. BOX 178

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : SB21B.11738

Amount of Each Disbursement this Period

202.18

Full Name (Last, First, Middle Initial)

C. COMCAST

Mailing Address P.O. BOX 3005

City SOUTHEASTERN State PA Zip Code 19398

Purpose of Disbursement
COMPUTER SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : SB21B.11739

Amount of Each Disbursement this Period

245.63

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3573.48

**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"/> 24	<input type="checkbox"/> 25	<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)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. COVINGTON & BURLING

Mailing Address 1201 PENNSYLVANIA AVE, NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2014

Transaction ID : SB21B.11724

Amount of Each Disbursement this Period

424.00

Full Name (Last, First, Middle Initial)

B. COVINGTON & BURLING

Mailing Address 1201 PENNSYLVANIA AVE, NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 28 / 2014

Transaction ID : SB21B.11748

Amount of Each Disbursement this Period

907.00

Full Name (Last, First, Middle Initial)

C. DEER PARK

Mailing Address P.O. BOX 52271

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
OFFICE EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2014

Transaction ID : SB21B.11726

Amount of Each Disbursement this Period

31.66

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1362.66

**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"/> 24	<input type="checkbox"/> 25	<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)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. FEDERAL EXPRESS

Mailing Address P.O. BOX 1140

City State Zip Code
MEMPHIS TN 28101

Purpose of Disbursement
SHIPPING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y
08 / 08 / 2014

Transaction ID : SB21B.11727

Amount of Each Disbursement this Period

20.20

Full Name (Last, First, Middle Initial)

B. FEDERAL EXPRESS

Mailing Address P.O. BOX 1140

City State Zip Code
MEMPHIS TN 28101

Purpose of Disbursement
SHIPPING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y
08 / 19 / 2014

Transaction ID : SB21B.11729

Amount of Each Disbursement this Period

20.20

Full Name (Last, First, Middle Initial)

C. FEDERAL EXPRESS

Mailing Address P.O. BOX 1140

City State Zip Code
MEMPHIS TN 28101

Purpose of Disbursement
SHIPPING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : SB21B.11756

Amount of Each Disbursement this Period

44.13

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

84.53

**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"/> 24	<input type="checkbox"/> 25	<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)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. HELLER INFORMATION SERVICES

Mailing Address 30 W GUDE DR, #220

City State Zip Code
ROCKVILLE MD 20850

Purpose of Disbursement
COMPUTER SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 19 / 2014

Transaction ID : SB21B.11732

Amount of Each Disbursement this Period

211.50

Full Name (Last, First, Middle Initial)

B. INDEPENDENT PLAN COORDINATORS

Mailing Address P.O. BOX 2899

City State Zip Code
VIRGINIA BEACH VA 23450

Purpose of Disbursement
PLAN FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 08 / 2014

Transaction ID : SB21B.11728

Amount of Each Disbursement this Period

1224.00

Full Name (Last, First, Middle Initial)

C. IRON MOUNTAIN

Mailing Address P.O. BOX 27128

City State Zip Code
NEW YORK NY 10087

Purpose of Disbursement
STORAGE FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 19 / 2014

Transaction ID : SB21B.11733

Amount of Each Disbursement this Period

334.32

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1769.82

**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"/> 24	<input type="checkbox"/> 25	<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)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. LEXIS NEXIS

Mailing Address P.O. BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement
DUES & SUBSCRIPTIONS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2014

Transaction ID : SB21B.11734

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

B. LPS

Mailing Address P.O. BOX 2325

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
PAC DATA PROCESSING SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2014

Transaction ID : SB21B.11741

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. LPS

Mailing Address P.O. BOX 2325

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
PAC DATA PROCESSING SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2014

Transaction ID : SB21B.11745

Amount of Each Disbursement this Period

86.93

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

536.93

**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"/> 24	<input type="checkbox"/> 25	<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)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. LPS

Mailing Address P.O. BOX 2325

City State Zip Code
FAIRFAX VA 22031

Purpose of Disbursement
PAC DATA ENTRY SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2014

Transaction ID : SB21B.11746

Amount of Each Disbursement this Period

19.21

Full Name (Last, First, Middle Initial)

B. BILL MOELLER

Mailing Address 2800 S SHIRLINGTON RD #930

City State Zip Code
ARLINGTON VA 22206

Purpose of Disbursement
PAC CONSULTING WRITER/RESEARCHER

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 28 / 2014

Transaction ID : SB21B.11740

Amount of Each Disbursement this Period

2250.00

Full Name (Last, First, Middle Initial)

C. OFFICE SHREDDING

Mailing Address 6500 KANE WAY

City State Zip Code
ELKRIDGE MD 21075

Purpose of Disbursement
OFFICE EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2014

Transaction ID : SB21B.11735

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2319.21

**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"/> 24	<input type="checkbox"/> 25	<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)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. Dorie Velezis

Mailing Address 2800 S Shirlington Rd #930

City Arlington State VA Zip Code 22206

Purpose of Disbursement
PAC COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	28	/	2014

Transaction ID : SB21B.11749

Amount of Each Disbursement this Period

2250.00

Full Name (Last, First, Middle Initial)

B. VERIZON

Mailing Address P.O. BOX 17577

City BALTIMORE State MD Zip Code 21297

Purpose of Disbursement
TELEPHONE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	19	/	2014

Transaction ID : SB21B.11736

Amount of Each Disbursement this Period

444.98

Full Name (Last, First, Middle Initial)

C. DEAN VIRAG

Mailing Address 14511 RILLHURST DR

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement
WEBSITE SUPPORT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	08	/	2014

Transaction ID : SB21B.11725

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

3194.98

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"/> 24	<input type="checkbox"/> 25	<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)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
PAC CAGING AND DATA ENTRY SERVICES

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		19		2014

Transaction ID : SB21B.11742

Amount of Each Disbursement this Period

766.89

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

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

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

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

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

766.89

28235.34

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. STEVE RUSSELL FOR CONGRESS

Mailing Address 10600 S PENN AVE SUITE 16-284

City State Zip Code
OKLAHOMA CITY OK 73170

Purpose of Disbursement
CONTRIBUTION

Candidate Name
STEVE RUSSELL FOR CONGRESS

Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify) ▼
 State: OK District: 05 Runoff

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2014

Transaction ID : SB23.11730

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

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
	/		/	

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

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
	/		/	

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2500.00

2500.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 47 OF 49
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AMERICA DIRECT	Nature of Debt (Purpose): PAC DIRECT MAIL PRODUCTION
Mailing Address 1272 CORPORATE PARK DR	
City State Zip Code FOREST VA 24511	

Outstanding Balance Beginning This Period 2955.31	Transaction ID : SD10.4357	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2955.31

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor DIRECTECH	Nature of Debt (Purpose): CAGING AND DATA PROCESSING SERVICES
Mailing Address 8595 GROVEMONT CIRCLE	
City State Zip Code GAITHERSBURG MD 20877	

Outstanding Balance Beginning This Period 223.11	Transaction ID : SD10.4359	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 223.11

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LPS	Nature of Debt (Purpose): PAC DATA PROCESSING SERVICES
Mailing Address P.O. BOX 2325	
City State Zip Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 100.00	Transaction ID : SD10.11616	
Amount Incurred This Period 0.00	Payment This Period 100.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	3178.42
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 48 OF 49
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LPS	Nature of Debt (Purpose): PAC DATA PROCESSING SERVICES
Mailing Address P.O. BOX 2325	
City State Zip Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.11743	
Amount Incurred This Period 86.93	Payment This Period 86.93	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LPS	Nature of Debt (Purpose): PAC DATA PROCESSING SERVICES
Mailing Address P.O. BOX 2325	
City State Zip Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.11744	
Amount Incurred This Period 19.21	Payment This Period 19.21	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LPS	Nature of Debt (Purpose): PAC DATA ENTRY SERVICES
Mailing Address P.O. BOX 2325	
City State Zip Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.11753	
Amount Incurred This Period 215.77	Payment This Period 0.00	Outstanding Balance at Close of This Period 215.77

1) SUBTOTALS This Period This Page (optional)..... ▶	215.77
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 49 OF 49
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MWM DIRECT MARKETING SERVICES	Nature of Debt (Purpose): PAC DIRECT MAIL
Mailing Address 8048 HILLRISE COURT	
City State Zip Code ELKRIDGE MD 21075	

Outstanding Balance Beginning This Period 2320.90	Transaction ID : SD10.4361	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2320.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor WASHINGTON INTELLIGENCE BUREAU	Nature of Debt (Purpose): PAC CAGING AND DATA ENTRY SERVICES
Mailing Address 4128 PEPSI PLACE	
City State Zip Code CHANTILLY VA 20151	

Outstanding Balance Beginning This Period 766.89	Transaction ID : SD10.11617	
Amount Incurred This Period 0.00	Payment This Period 766.89	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor WASHINGTON INTELLIGENCE BUREAU	Nature of Debt (Purpose): PAC CAGING AND DATA PROCESSING SERVICES
Mailing Address 4128 PEPSI PLACE	
City State Zip Code CHANTILLY VA 20151	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.11751	
Amount Incurred This Period 585.29	Payment This Period 0.00	Outstanding Balance at Close of This Period 585.29

1) SUBTOTALS This Period This Page (optional)..... ▶	2906.19
2) TOTALS This Period (last page this line number only)..... ▶	6300.38
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) ▶	6300.38