

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
CAMPAIGN FOR WORKING FAMILIES

ADDRESS (number and street) 2800 Shirlington Road, Suite 930
Arlington VA 22206
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** C00325076
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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 04 2008 in the State of _____

5. Covering Period 10 16 2008 through 11 24 2008

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 Amy Myers

Signature of Treasurer Electronically Filed by Amy Myers Date 12 04 2008

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

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		1339727.01
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	1679269.66									
(c) Total Receipts (from Line 19)	81111.21	914927.66								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1760380.87	2254654.67								
7. Total Disbursements (from Line 31)	105451.94	599725.74								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1654928.93	1654928.93								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	17651.71									

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
CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

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	47207.00	603559.74
(i) Itemized (use Schedule A)	27308.27	294394.06
(ii) Unitemized	74515.27	897953.80
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	74515.27	897953.80
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	234.83
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	6595.94	16739.03
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 Transfer (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))	81111.21	914927.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	81111.21	914927.66

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	48451.94	356100.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	48451.94	356100.74
22. Transfers to Affiliated/Other Party Committees.....	10000.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	42500.00	224000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	4500.00	4625.00
(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))	4500.00	4625.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	105451.94	599725.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	105451.94	599725.74

DETAILED SUMMARY PAGE
of Disbursements

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)	74515.27	897953.80
34. Total Contribution Refunds (from Line 28(d))	4500.00	4625.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	70015.27	893328.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	48451.94	356100.74
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	234.83
38. Net Operating Expenditures (subtract Line 37 from Line 36)	48451.94	355865.91

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 206
(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

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.

Full Name (Last, First, Middle Initial)
DR NATHANIEL E ADAMSON, JR

Mailing Address 2600 BARRACKS RD APT 289

City State Zip Code
CHARLOTTESVLE VA 22901

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.16899

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MR ELDON E ANDRES

Mailing Address 5165 SAINT LOUIS ROAD NE

City State Zip Code
GERVAIS OR 97026

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

Name of Employer Occupation
WOODBUM SCHOOL DISTRICT RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.17798

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MRS AMANDA A A APPLGATH

Mailing Address 22530 BUCKTROUT LANE

City State Zip Code
KATY TX 77449

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

Name of Employer Occupation
EPOXY DESIGN SYSTEMS HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.17515

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **350.00**

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: (check only one)	PAGE 7 / 206
	<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.	Full Name (Last, First, Middle Initial) MR JEFFREY B ARMOUR	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 8
	Mailing Address 25511 RANGEWOOD RD	Transaction ID: SA11AI.17707
	City State Zip Code LAGUNA HILLS CA 92653	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation ARMOUR PROPERTIES REAL ESTATE	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) KAREN ARMOUR	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 8
	Mailing Address 25511 RANGEWOOD ROAD	Transaction ID: SA11AI.17708
	City State Zip Code LAGUNA HILLS CA 92653	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) MR CHARLES D AYRES	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 8
	Mailing Address 4911 CASA ORO DRIVE	Transaction ID: SA11AI.17722
	City State Zip Code YORBA LINDA CA 92886	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

SUBTOTAL of Receipts This Page (optional)	▶	10100.00
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 8 / 206
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) DAVID BAIN		Date of Receipt
	Mailing Address 1000 PECAN DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 7 / 2 0 0 8
	City	State	Zip Code
	FAIRVIEW	TX	75069
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17473
Name of Employer CORWIN ENGINEERING INC		Occupation ENGINEER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 500.00	<input type="text"/> 50.00

B.	Full Name (Last, First, Middle Initial) SHIRLEY BANTER		Date of Receipt
	Mailing Address 13611 NEILLS BRANCH DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 4 / 2 0 0 8
	City	State	Zip Code
	HOUSTON	TX	77077
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17510
Name of Employer INFO REQUESTED- NOT RECD		Occupation INFO REQUESTED- NOT RECD	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 650.00	<input type="text"/> 50.00

C.	Full Name (Last, First, Middle Initial) MR LEROY L BARTON		Date of Receipt
	Mailing Address 7607 GRAYS DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 5 / 2 0 0 8
	City	State	Zip Code
	GROSSE ILE	MI	48138
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17186
Name of Employer CHRYSLER CORPORATION		Occupation PAYROLL SPECIALIST	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 220.00	<input type="text"/> 20.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 120.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 206
	<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.	Full Name (Last, First, Middle Initial) MRS ORVELLA M M BATCHELDER		Date of Receipt	
	Mailing Address 2205 HADDINGTON RD		M M / D D / Y Y Y Y 10 / 27 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.17289
	ROSEVILLE	MN	55113	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

B.	Full Name (Last, First, Middle Initial) MR RICHARD D BEARD		Date of Receipt	
	Mailing Address 1030 SOMERSET LN		M M / D D / Y Y Y Y 10 / 24 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.17156
	FORT WAYNE	IN	46805	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer INFO REQUESTED- NOT RECD		Occupation INFO REQUESTED- NOT RECD		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) MR ANTHONY R BIANCHI		Date of Receipt	
	Mailing Address 601 HACKBERRY RIDGE DRIVE		M M / D D / Y Y Y Y 10 / 17 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.17474
	MCKINNEY	TX	75070	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer INFO REQUESTED- NOT RECD		Occupation INFO REQUESTED- NOT RECD		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	▶	175.00
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 10 / 206
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MR ANTHONY R BIANCHI		Date of Receipt
	Mailing Address 601 HACKBERRY RIDGE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 17 / 2008
	City	State	Zip Code
	MCKINNEY	TX	75070
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17475
Name of Employer INFO REQUESTED- NOT RECD		Occupation INFO REQUESTED- NOT RECD	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
			<input type="text"/> 275.00

B.	Full Name (Last, First, Middle Initial) MR BYRL J BISHOP		Date of Receipt
	Mailing Address 2280 CIELO VISTA		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 20 / 2008
	City	State	Zip Code
	ALAMOGORDO	NM	88310
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17630
Name of Employer SELF-BISHOP REAL ESTATE		Occupation REAL ESTATE BROKER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 400.00
			<input type="text"/> 400.00

C.	Full Name (Last, First, Middle Initial) DR GARY R BISHOP		Date of Receipt
	Mailing Address 15144 LARRY STREET		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 05 / 2008
	City	State	Zip Code
	POWAY	CA	92064
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17681
Name of Employer RIVERSIDE COUNTY		Occupation PHARMACIST	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 35.00
			<input type="text"/> 385.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 460.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 206
(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.

Full Name (Last, First, Middle Initial)
MRS RONDA R BLEHM-KUK

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: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1010.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 18 / 2008

Transaction ID: SA11AI.17712

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
MS ANGELINE BOERSMA

Mailing Address 2634 NE 6TH STREET

City State Zip Code
GRESHAM OR 97030

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2008

Transaction ID: SA11AI.17799

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
WILLIAM BOLHUIS

Mailing Address 4771-32ND AVE

City State Zip Code
HUDSONVILLE MI 49426

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2008

Transaction ID: SA11AI.17228

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **500.00**

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 12 / 206
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MR RONALD J BOOMSTRA		Date of Receipt
	Mailing Address 585 BIRCHWOOD ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 17 / 2008
	City	State	Zip Code
	JACKSON	MI	49203
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17211
Name of Employer RETIRED		Occupation RETIRED MILITARY	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 200.00
		<input type="text"/> 900.00	

B.	Full Name (Last, First, Middle Initial) MR RONALD A BOSS		Date of Receipt
	Mailing Address 977 COACHWAY		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 16 / 2008
	City	State	Zip Code
	ANNAPOLIS	MD	21401
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.16878
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 1200.00	

C.	Full Name (Last, First, Middle Initial) MR TERRY O BRISTOL		Date of Receipt
	Mailing Address 344 E FOOTHILLS PKWY RED ROOM 9-W		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 11 / 05 / 2008
	City	State	Zip Code
	FORT COLLINS	CO	80525
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17569
Name of Employer 344E FOOTHILLS PARKWAY FC COLORADO		Occupation ASSET MGR	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 550.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 300.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 13 / 206
(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. Full Name (Last, First, Middle Initial)
MR DEL C BROOKS

Mailing Address 12789 MUIRFIELD BLVD N

City State Zip Code
JACKSONVILLE FL 32225

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

Name of Employer Occupation
SMURFIT STORE CONT. CORP GEN MGR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	8

Transaction ID: SA11AI.16990

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR WENDELL BROWN

Mailing Address 300 NORTH FILLMORE ST

City State Zip Code
ARLINGTON VA 22201

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

Name of Employer Occupation
SELF ACCOUNTANT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	8

Transaction ID: SA11AI.16891

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
WILLIAM P BUCK, JR

Mailing Address 2084 BROOK HIGHLAND RDG

City State Zip Code
BIRMINGHAM AL 35242

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

Name of Employer Occupation
SELF ORAL & MAXILLOFACIAL SURGEON

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: SA11AI.17037

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **225.00**

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 14 / 206

(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.

Full Name (Last, First, Middle Initial)
MS CAROLYN J BULSON

Mailing Address 2001 HARRISBURG PIKE APT 409ML

City State Zip Code
LANCASTER PA 17601

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

Name of Employer Occupation
INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.16823

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
MR THOMAS J BURKS

Mailing Address 748 HORIZON BOULEVARD

City State Zip Code
SOCORRO TX 79927

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

Name of Employer Occupation
WHOLESALE LUMBER SALES

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.17554

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
CARL C CALMA

Mailing Address 3807 MOUNT CARMEL LN

City State Zip Code
MELBOURNE FL 32901

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

Name of Employer Occupation
INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.17009

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

650.00

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 / 206
(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. Full Name (Last, First, Middle Initial)
MR RUSSELL A CARDENAS

Mailing Address 510 E SUNSHINE DRIVE

City State Zip Code
SAN ANTONIO TX 78228

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

Name of Employer ALCOA Occupation COST ANALYST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.17528

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR GARLAND D CARLSON

Mailing Address 9629 MAPLE DRIVE

City State Zip Code
OMAHA NE 68134

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 433.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.17433

Amount of Each Receipt this Period
12.00

C. Full Name (Last, First, Middle Initial)
MRS CHARRON CASTALDO

Mailing Address 10811 LACONIA DR

City State Zip Code
VILLA PARK CA 92861

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

Name of Employer DON BRANDEL PLUMBING INC Occupation PLUMBING CONTRACTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.17721

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **162.00**

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 / 206
(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.

Full Name (Last, First, Middle Initial)
MR GORDON CHAN

Mailing Address 1023 NE 98TH STREET

City State Zip Code
SEATTLE WA 98115

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

Name of Employer Occupation
NORTHWEST HOSP C. T. TECHNOLOGIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.17832

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MS DOROTHY M CLARK

Mailing Address POBOX 4

City State Zip Code
SILVER LAKE NY 14549

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.16780

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
MRS FRANCES CLARK

Mailing Address 907 COLONY RIDGE CT

City State Zip Code
IRVING TX 75061

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

Name of Employer Occupation
OWNER PIZZA SALON

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
542.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.17472

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **175.00**

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: (check only one)	PAGE 17 / 206
	<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.	Full Name (Last, First, Middle Initial) MRS ELIZABETH CRAINE	Date of Receipt MM / DD / YYYY 10 / 27 / 2008
	Mailing Address 28977 OLD TRILBY ROAD	Transaction ID: SA11AI.17025
	City State Zip Code BROOKSVILLE FL 34602	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation UNIVERSITY COMM HOSPITAL RETIRED	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) ROGER CRAWFORD	Date of Receipt MM / DD / YYYY 11 / 17 / 2008
	Mailing Address 7784 DOUGLAS DRIVE	Transaction ID: SA11AI.17600
	City State Zip Code PARK CITY UT 84098	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation SELF BROADCAST TECH	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

C.	Full Name (Last, First, Middle Initial) MS LUCILLE S CROSS	Date of Receipt MM / DD / YYYY 11 / 05 / 2008
	Mailing Address 11320 DURGIN RD SE	Transaction ID: SA11AI.17849
	City State Zip Code OLYMPIA WA 98513	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation ST PETER HOSPITAL MEDICAL TRANSCRIPTIONIST	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	105.00
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 18 / 206
(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.

Full Name (Last, First, Middle Initial)
MRS DOREEN J DEBLIEK

Mailing Address 5523 WOODVIEW PASS

City MIDLAND State MI Zip Code 48642

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 27 / 2008
Transaction ID: SA11AI.17197
 Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
MR WARREN W DEKREY

Mailing Address 730 ASPEN PL

City BISMARCK State ND Zip Code 58503

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 20 / 2008
Transaction ID: SA11AI.17342
 Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
MR LEONARD A DEO

Mailing Address 2 SYLDEO DR

City PARSIPPANY State NJ Zip Code 07054

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

Name of Employer FLOWERS & GIFTS- INC. Occupation FLORIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 11 / 05 / 2008
Transaction ID: SA11AI.16749
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► **250.00**

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 19 / 206
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MR RONALD W DOMBROSKI		Date of Receipt
	Mailing Address 222 TERRACE AVENUE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	SHAVERTOWN	PA	18708
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.16832
Name of Employer SELF EMPLOYED		Occupation REAL ESTATE MANAGER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 600.00	

B.	Full Name (Last, First, Middle Initial) MR KIRK L DORN		Date of Receipt
	Mailing Address 9 CHERRYWOOD DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	EAST NORTHPORT	NY	11731
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.16771
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 950.00	

C.	Full Name (Last, First, Middle Initial) MR MICHAEL A DOUGHERTY		Date of Receipt
	Mailing Address 19 SHEFFIELD ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	HUDSON	NH	03051
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.16741
Name of Employer VISITUDE- INC.		Occupation EXECUTIVE CONSULTANT	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 15.00
		<input type="text"/> 215.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 565.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 206
(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.

Full Name (Last, First, Middle Initial)
MR RICHARD K EGAN

Mailing Address 32 CITATION CT

City State Zip Code
TINTON FALLS NJ 07724

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

Name of Employer Occupation
BB&R FINANCIAL ADVISOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.16754

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MR CRAIG W EGLOFF

Mailing Address 27001 HIGHWAY 128

City State Zip Code
YORKVILLE CA 95494

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

Name of Employer Occupation
JAYMES & JAYMES INSURANCE BROKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4050.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.17776

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
MR CRAIG W EGLOFF

Mailing Address 27001 HIGHWAY 128

City State Zip Code
YORKVILLE CA 95494

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

Name of Employer Occupation
JAYMES & JAYMES INSURANCE BROKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.17777

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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 21 / 206
(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. Full Name (Last, First, Middle Initial)
MR CRAIG W EGLOFF

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: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4360.00

Date of Receipt 11 / 19 / 2008
Transaction ID: SA11AI.17778
 Amount of Each Receipt this Period 260.00

B. Full Name (Last, First, Middle Initial)
MR KENNETH P ENSING

Mailing Address 1763 BRIDLE CREEK ST SE

City KENTWOOD State MI Zip Code 49508

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 22 / 2008
Transaction ID: SA11AI.17233
 Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
MR HUNTER EWING

Mailing Address 4810 JETT RD

City ATLANTA State GA Zip Code 30327

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

Name of Employer SELF Occupation SALES

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 17 / 2008
Transaction ID: SA11AI.16965
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 610.00

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: (check only one)	PAGE 22 / 206
	<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.	Full Name (Last, First, Middle Initial) MRS BETTY S FIPP	Date of Receipt
	Mailing Address 7639 HOLLYRIDGE CIR	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 30 / 2008
	City State Zip Code JACKSONVILLE FL 32256	Transaction ID: SA11AI.16992
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 100.00
	Name of Employer Occupation HOUSEWIFE HOUSEWIFE	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 300.00	

B.	Full Name (Last, First, Middle Initial) MR TOM FRANK	Date of Receipt
	Mailing Address 7845 HOLDER ST	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 14 / 2008
	City State Zip Code BUENA PARK CA 90620	Transaction ID: SA11AI.17646
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 200.00
	Name of Employer Occupation BOEING CO PROGRAMMER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 500.00	

C.	Full Name (Last, First, Middle Initial) MR CARL M FRANZELLA	Date of Receipt
	Mailing Address 2329 SEVERN AVENUE	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 22 / 2008
	City State Zip Code METAIRIE LA 70001	Transaction ID: SA11AI.17440
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 25.00
	Name of Employer Occupation SUN INTERIORS PRESIDENT	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 340.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 325.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 23 / 206
(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. Full Name (Last, First, Middle Initial)
MR FRANCIS L FRIEND

Mailing Address 2125 LUANN LN APT 6

City State Zip Code
MADISON WI 53713

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

Name of Employer INTERVARSITY CHRISTIAN FELLOWSHIP Occupation MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.17268

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR ERWIN R FRIESEN

Mailing Address PO BOX 342

City State Zip Code
HATHAWAY PINES CA 95233

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: SA11AI.17766

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MR WAYNE GARNER

Mailing Address 236 CROSS COUNTRY DRIVE

City State Zip Code
HEWITT TX 76643

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

Name of Employer RETIRED Occupation TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	8

Transaction ID: SA11AI.17499

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **100.00**

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 24 / 206

(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.

Full Name (Last, First, Middle Initial)
MRS SUSAN M GEOGHAN

Mailing Address 6046 HAMPTON CT

City State Zip Code
EAST PETERSBURG PA 17520

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

Name of Employer Occupation
AMISH COUNTRY GAZEBOS SALES

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Transaction ID: SA11AI.16811

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)
MRS JOAN L GINSBURG

Mailing Address 545 DUNNEGAN PLACE

City State Zip Code
LAGUNA BEACH CA 92651

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

Name of Employer Occupation
HOUSEWIFE HOUSEWIFE / VOLUNTEER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	0	8

Transaction ID: SA11AI.17705

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
MARC R GOODWIN

Mailing Address 657 WALNUT STREET

City State Zip Code
EDMONDS WA 98020

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

Name of Employer Occupation
GLENN T GOODWIN - PHD BOOKKEEPER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	0	8

Transaction ID: SA11AI.17827

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional) ▶

440.00

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 25 / 206

(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.

Full Name (Last, First, Middle Initial)
MR JERRY GOULDING

Mailing Address PO BOX 8173

City State Zip Code
TRUCKEE CA 96162

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

Name of Employer Occupation
RETIRED RETIRED BUILDING CONTRACTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	0	8

Transaction ID: SA11AI.17793

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
MR ROE D GREGG

Mailing Address 262 MOCKINGBIRD LN

City State Zip Code
SAN ANGELO TX 76901

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	0	8

Transaction ID: SA11AI.17502

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
MRS CARL W GUSTKE

Mailing Address 233 STATON ROAD

City State Zip Code
CABOT AR 72023

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

Name of Employer Occupation
FEDERAL EX - (WIFE) REBSA-MEN R. H. PILOT - WIFE DEBORAH-RN

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	0	8

Transaction ID: SA11AI.17446

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) ▶

200.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 206
(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. Full Name (Last, First, Middle Initial)
MRS JANIE TATE HALTER

Mailing Address 585 OLD FARM RD

City State Zip Code
BANNER ELK NC 28604

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

Name of Employer Occupation
REGISTERED NURSE REGISTERED NURSE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: SA11AI.16938

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS EILEEN P HAMEL

Mailing Address 645 WILLOW VALLEY SQ # J312

City State Zip Code
LANCASTER PA 17602

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	8

Transaction ID: SA11AI.16825

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
SAM HAMILTON

Mailing Address 2201 N SANGRE RD

City State Zip Code
STILLWATER OK 74075

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.17459

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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 27 / 206
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) COLIN HANNA		Date of Receipt
	Mailing Address 603 FAIRWAY DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 6 / 2 0 0 8
	City	State	Zip Code
	WEST CHESTER	PA	19382
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.17883
Name of Employer LET FREEDOM RING		Occupation CONSULTANT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00

B.	Full Name (Last, First, Middle Initial) DR JOHN HARTFORD		Date of Receipt
	Mailing Address 3644 TERRA GRANADA DRIVE APT 2A		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 8 / 2 0 0 8
	City	State	Zip Code
	WALNUT CREEK	CA	94595
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.17760
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 280.00

C.	Full Name (Last, First, Middle Initial) MS M SANDRA HEA		Date of Receipt
	Mailing Address 5924 CHILDREDD AVENUE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 5 / 2 0 0 8
	City	State	Zip Code
	SAINT LOUIS	MO	63109
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.17398
Name of Employer SELF EMPLOYED		Occupation REALTOR	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 350.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5125.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 28 / 206
(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. Full Name (Last, First, Middle Initial)
MR DALE HEDRICK

Mailing Address 2200 CENTREPARK WEST DR

City State Zip Code
WEST PALM BEACH FL 33409

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

Name of Employer Occupation
HEDRICK BROTHERS GENERAL CONTROLTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.17019

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR KEITH L HEDSTROM

Mailing Address 101 EMERALD HIGHLANDS WAY

City State Zip Code
SEQUIM WA 98382

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.17844

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
MR KEITH L HEDSTROM

Mailing Address 101 EMERALD HIGHLANDS WAY

City State Zip Code
SEQUIM WA 98382

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.17845

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **1040.00**

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 29 / 206
(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. Full Name (Last, First, Middle Initial)
JOSEPH HENEHAN

Mailing Address 37 LAURELHURST DR

City State Zip Code
LADERA RANCH CA 92694

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

Name of Employer Occupation
THE HENEHAN CO INSURANCE AGENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2008

Transaction ID: SA11AI.17715

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR KEVIN D HENRY

Mailing Address 2611 SPRING MILL PL

City State Zip Code
BURLINGTON KY 41005

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

Name of Employer Occupation
INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2008

Transaction ID: SA11AI.17087

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
MR JOHN P HERRING

Mailing Address 440 TERRAPIN LN

City State Zip Code
NEWARK DE 19711

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2008

Transaction ID: SA11AI.16847

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **1080.00**

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 / 206
(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. Full Name (Last, First, Middle Initial)
MRS BABETTE HILL

Mailing Address 157 NE COAL LANE

City State Zip Code
TRENTON MO 64683

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

Name of Employer Occupation
HOME FAMILY MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	8

Transaction ID: SA11AI.17409

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
MR THEODORE G HINES

Mailing Address 434 E WASHINGTON BLVD

City State Zip Code
GROVE CITY PA 16127

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

Name of Employer Occupation
PINE INSTRUMENT CO EXECUTIVE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.16797

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ALAN HOKANSON

Mailing Address 152 GRANDE VISTA WAY

City State Zip Code
CHELSEA AL 35043

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

Name of Employer Occupation
BIOHORIZONS IMPLANT SYSTEM INC VP OPS

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: SA11AI.17033

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **900.00**

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 31 / 206
(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. Full Name (Last, First, Middle Initial)
MR ANDREW J HORNER

Mailing Address 13 DOWNS LAKE CIRCLE

City State Zip Code
DALLAS TX 75230

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

Name of Employer PDI Occupation CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.17487

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR PAUL R HOULE, II

Mailing Address 320 PENINSULA POINTE DR

City State Zip Code
CANTON GA 30115

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

Name of Employer ARIBA Occupation DIRECTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.16959

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MRS CYNTHIA HUEMPFINER

Mailing Address 525 JACK LEG LN

City State Zip Code
BOZEMAN MT 59715

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

Name of Employer DICK WALTER AUTO CENTER Occupation SECRETARY/BOOKKEEPER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.17352

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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 32 / 206

(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.

Full Name (Last, First, Middle Initial)
MRS DIANA E HULL

Mailing Address 3000 LEWIS RD

City State Zip Code
RIVERTON WY 82501

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

Name of Employer Occupation
SELF EMPLOYED SELF EMPLOYED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	8

Transaction ID: SA11AI.17587

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
MR ALDEN P JOHNSON

Mailing Address 5010 LA BARRANCA ST

City State Zip Code
SAN ANTONIO TX 78233

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

Name of Employer Occupation
SELF MORTGAGE LOAN OFFICER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	0	8

Transaction ID: SA11AI.17529

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
MR C HOWARD KAST

Mailing Address 2552 E ALAMEDA AVENUE UNIT 30

City State Zip Code
DENVER CO 80209

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

Name of Employer Occupation
INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	0	8

Transaction ID: SA11AI.17557

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) ►

375.00

TOTAL This Period (last page this line number only) ►

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**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 33 / 206
	<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.	Full Name (Last, First, Middle Initial) MR GREG KAUFFMAN		Date of Receipt
	Mailing Address 24219 BEAR MTN		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	SAN ANTONIO	TX	78258
	FEC ID number of contributing federal political committee.	C	Transaction ID: SA11AI.17532
Name of Employer VPS		Occupation AIRLINE PILOT	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

B.	Full Name (Last, First, Middle Initial) DR JOHN D KEISLING		Date of Receipt
	Mailing Address 35 ERICA LANE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	BELEN	NM	87002
	FEC ID number of contributing federal political committee.	C	Transaction ID: SA11AI.17622
Name of Employer SAIC		Occupation SCIENTIST	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.00

C.	Full Name (Last, First, Middle Initial) JENNA V KELLAR		Date of Receipt
	Mailing Address 2750CR 507		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	EARTH	TX	79031
	FEC ID number of contributing federal political committee.	C	Transaction ID: SA11AI.17544
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 200.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 470.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 206
(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.

Full Name (Last, First, Middle Initial)
MR MICHAEL KEMPER

Mailing Address 10816 N 68TH PL

City State Zip Code
SCOTTSDALE AZ 85254

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

Name of Employer Occupation
KEMPER CO BUSINESSMAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 23 / 2008

Transaction ID: SA11AI.17615

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Mr. HENDRICK KERKSTRA

Mailing Address 1711 TOURS COURT

City State Zip Code
BAKERSFIELD CA 93311

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 17 / 2008

Transaction ID: SA11AI.17735

Amount of Each Receipt this Period
60.00

C.

Full Name (Last, First, Middle Initial)
MRS CAROLYN C KINDER

Mailing Address 4212 KEEPSAKE COURT

City State Zip Code
MODESTO CA 95356

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

Name of Employer Occupation
DIALYSIS CENTER RENAL DIETITIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.03

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2008

Transaction ID: SA11AI.17769

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **1085.00**

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 35 / 206
(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. Full Name (Last, First, Middle Initial)
MR JOHN D KINZER

Mailing Address 11413 NASSAU DRIVE NE

City State Zip Code
ALBUQUERQUE NM 87111

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

Name of Employer Occupation
SELF-EMPLOYED TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	8

Transaction ID: SA11AI.17623

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR JOHN S KIRKPATRICK

Mailing Address 13874 BELLA RIVA LN

City State Zip Code
JACKSONVILLE FL 32225

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

Name of Employer Occupation
UNIVERSITY OF FLORIDA EDUCATOR/PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.16991

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MS EDITH L KLATT

Mailing Address 9744 NORTH OLSON RD NW

City State Zip Code
BREMERTON WA 98311

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

Name of Employer Occupation
JEFFERSON GENERAL HOSPITAL MEDICAL TECHNOLOGIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: SA11AI.17840

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

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 36 / 206
(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. Full Name (Last, First, Middle Initial)
MRS LINDA KOHNEN

Mailing Address 23240 COUNTY ROAD 30

City State Zip Code
ROGERS MN 55374

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

Name of Employer Occupation
HOMEMAKER/HOUSEWIFE HOMEMAKER/HOUSEWIFE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
615.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.17293

Amount of Each Receipt this Period
55.00

B. Full Name (Last, First, Middle Initial)
MR ROBERT L KOLES

Mailing Address 1300 N 130TH AVE

City State Zip Code
FALL CREEK WI 54742

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.17282

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
MR CHRISTOPHER J LAIL

Mailing Address 158 BERRY MANOR CIR

City State Zip Code
SAINT PETERS MO 63376

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

Name of Employer Occupation
INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.17403

Amount of Each Receipt this Period
70.00

SUBTOTAL of Receipts This Page (optional) ► **275.00**

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 37 / 206
(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. Full Name (Last, First, Middle Initial)
MR ROBERT LAKE

Mailing Address 2721 18TH STREET

City State Zip Code
BAKERSFIELD CA 93301

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

Name of Employer Occupation
INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: SA11AI.17734

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR J SMITH LANIER, II

Mailing Address PO BOX 70

City State Zip Code
WEST POINT GA 31833

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

Name of Employer Occupation
J SMITH LANIER & CO CHMN & CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.16984

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
ELDON R LARSEN

Mailing Address 2562 TREASURE DR APT S4100

City State Zip Code
SANTA BARBARA CA 93105

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

Name of Employer Occupation
INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: SA11AI.17731

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **375.00**

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 38 / 206

(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.

Full Name (Last, First, Middle Initial)
MRS GLENN G LARSON

Mailing Address 8950 235TH ST N

City State Zip Code
FOREST LAKE MN 55025

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

Name of Employer Occupation
WHOLESALE PRODUCE SUPPLY TRUCKING

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.17286

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
BRIAN LEE

Mailing Address 292 JACKSONVILLE RD

City State Zip Code
POMPTON PLAINS NJ 07444

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

Name of Employer Occupation
INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: SA11AI.16751

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
SANDRA LEE

Mailing Address 31200 W LEE DR

City State Zip Code
SUTTON AK 99674

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	8

Transaction ID: SA11AI.17875

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 206
(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.

Full Name (Last, First, Middle Initial)
DR JACK W LESCH

Mailing Address 34 SILVERSTRAND PLACE

City SPRING State TX Zip Code 77381

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

Name of Employer LIGHTHOUSE HOSPICE Occupation PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 20 / 2008
Transaction ID: SA11AI.17514
Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
MR JAMES LUDINGTON

Mailing Address 3711 HUMMINGBIRD LN

City ROANOKE State VA Zip Code 24018

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

Name of Employer ARISE AMERICA MINISTRIES Occupation EXECUTIVE DIRECTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 16 / 2008
Transaction ID: SA11AI.16904
Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
MAJ JAMES P LUKE

Mailing Address 4273 BRISTOL DR

City DAYTON State OH Zip Code 45440

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

Name of Employer USAF Occupation INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 30 / 2008
Transaction ID: SA11AI.17134
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► **650.00**

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: (check only one)	PAGE 40 / 206
	<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.	Full Name (Last, First, Middle Initial) REV WALLACE A LUSK	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 8
	Mailing Address 13922 PENN SHOP ROAD	Transaction ID: SA11AI.16886
	City State Zip Code MOUNT AIRY MD 21771	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
Name of Employer LOCUST GROVE CHURCH OF BR-OTHERS	Occupation MINISTER - RETIRED	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	

B.	Full Name (Last, First, Middle Initial) MR WILLIAM R MACCORMICK	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 8
	Mailing Address 230 CREEKWOOD COURT	Transaction ID: SA11AI.17478
	City State Zip Code DUNCANVILLE TX 75116	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer INFO REQUESTED- NOT RECD	Occupation INFO REQUESTED- NOT RECD	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) MR WILLIAM R MACCORMICK	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 8
	Mailing Address 230 CREEKWOOD COURT	Transaction ID: SA11AI.17479
	City State Zip Code DUNCANVILLE TX 75116	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer INFO REQUESTED- NOT RECD	Occupation INFO REQUESTED- NOT RECD	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	340.00
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 41 / 206

(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.

Full Name (Last, First, Middle Initial)
MRS CAROLYN MATOVICH

Mailing Address 555 HARNESS RD

City State Zip Code
MONUMENT CO 80132

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

Name of Employer Occupation
HOMEMAKER ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	8

Transaction ID: SA11AI.17556

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
LYNN E MCADAM

Mailing Address 9735 W COUNTRY CLUB DR

City State Zip Code
SUN CITY AZ 85373

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

Name of Employer Occupation
OC INTERNATIONAL CLERGY

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	0	8

Transaction ID: SA11AI.17616

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MRS LYNN MCCLATCHEY

Mailing Address 45012 70TH AVENUE

City State Zip Code
LINN GROVE IA 51033

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

Name of Employer Occupation
SIOUX CENTRAL SCHOOL TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	0	8

Transaction ID: SA11AI.17239

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional) ▶

320.00

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 206
(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.

Full Name (Last, First, Middle Initial)
SHANNON MCGINLEY

Mailing Address 4 BULSAM CT

City BEDFORD State NH Zip Code 03110

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 17 / 2008
Transaction ID: SA11AI.16742
 Amount of Each Receipt this Period 30.00

B.

Full Name (Last, First, Middle Initial)
MAE MCKINLEY

Mailing Address 515 11TH AVE NE

City MINOT State ND Zip Code 58703

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt 11 / 10 / 2008
Transaction ID: SA11AI.17343
 Amount of Each Receipt this Period 50.00

C.

Full Name (Last, First, Middle Initial)
MRS SUZANNE S MEYER

Mailing Address 1055 CRYSTAL PARK ROAD

City MANITOU SPGS State CO Zip Code 80829

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

Name of Employer INFO REQUESTED- NOT RECD Occupation INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 22 / 2008
Transaction ID: SA11AI.17576
 Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional) ► 140.00

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 43 / 206
(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.

Full Name (Last, First, Middle Initial)
MR MELVYN MICHAELIAN

Mailing Address 2078 RANCHO LAS PALMAS DRIVE

City FALLBROOK State CA Zip Code 92028

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

Name of Employer FALLBROOK CA Occupation PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 20 / 2008
Transaction ID: SA11AI.17679
 Amount of Each Receipt this Period: 50.00

B.

Full Name (Last, First, Middle Initial)
MR JOSEPH P MILLER

Mailing Address 6617 E ORCHARD PLACE

City CENTENNIAL State CO Zip Code 80111

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

Name of Employer INFO REQUESTED- NOT RECD Occupation INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 31 / 2008
Transaction ID: SA11AI.17555
 Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
MR ROBERT L MILNE

Mailing Address 2517 BRENTWOOD DR

City ABILENE State TX Zip Code 79605

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 20 / 2008
Transaction ID: SA11AI.17551
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 200.00

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: (check only one)	PAGE 44 / 206
	<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.	Full Name (Last, First, Middle Initial) MR ROBERT L MITCHELL		Date of Receipt
	Mailing Address 4127 BEECHWOOD DR NW		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	ATLANTA	GA	30327
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.16966
Name of Employer APPLIED CERAMICS INC		Occupation CHAIRMAN	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 200.00
		<input type="text"/> 300.00	

B.	Full Name (Last, First, Middle Initial) MRS GWEN L MOORE		Date of Receipt
	Mailing Address 1213 CHRISTINE AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	ANNISTON	AL	36207
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17045
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 10.00
		<input type="text"/> 260.00	

C.	Full Name (Last, First, Middle Initial) MR MALCOLM S MORRIS		Date of Receipt
	Mailing Address 3992 INVERNESS DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	HOUSTON	TX	77019
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17506
Name of Employer INFO REQUESTED- NOT RECD		Occupation INFO REQUESTED- NOT RECD	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 400.00
		<input type="text"/> 400.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 610.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 45 / 206
(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. Full Name (Last, First, Middle Initial)
MRS ARTHA M NEUENFELDT
Mailing Address 637 ROBINSON RD
City JACKSON State MI Zip Code 49203
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00
Date of Receipt 10 / 24 / 2008
Transaction ID: SA11AI.17212
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
MRS ARTHA M NEUENFELDT
Mailing Address 637 ROBINSON RD
City JACKSON State MI Zip Code 49203
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 1060.00
Date of Receipt 11 / 05 / 2008
Transaction ID: SA11AI.17213
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
MR EDWARD M NICHOLS
Mailing Address 555 TAXTER ROAD
City ELMSFORD State NY Zip Code 10523
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation FINANCIAL PLANNER
Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00
Date of Receipt 10 / 30 / 2008
Transaction ID: SA11AI.16768
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 560.00
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 46 / 206
(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. Full Name (Last, First, Middle Initial)
MR STEVE NOVARRO

Mailing Address 712 N GARFIELD AVENUE

City ALHAMBRA State CA Zip Code 91801

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE INVESTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 22 / 2008
Transaction ID: SA11AI.17677
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MR ELIOT K NYMEYER

Mailing Address 25508 S KLEMME RD

City CRETE State IL Zip Code 60417

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

Name of Employer INFO REQUESTED- NOT RECD Occupation INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2200.00

Date of Receipt: 10 / 20 / 2008
Transaction ID: SA11AI.17371
 Amount of Each Receipt this Period: 800.00

C. Full Name (Last, First, Middle Initial)
MR ELIOT K NYMEYER

Mailing Address 25508 S KLEMME RD

City CRETE State IL Zip Code 60417

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

Name of Employer INFO REQUESTED- NOT RECD Occupation INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt: 10 / 23 / 2008
Transaction ID: SA11AI.17372
 Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ► 1100.00

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 47 / 206
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MRS SUSAN P OSBORN		Date of Receipt MM / DD / YYYY 10 / 27 / 2008		
	Mailing Address 2541 W PALOMINO DRIVE		Transaction ID: SA11AI.17611		
	City CHANDLER	State AZ	Zip Code 85224	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer HOMEMAKER	Occupation HOUSEWIFE & MOTHER			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00			

B.	Full Name (Last, First, Middle Initial) MR DENNIS G OTTEN		Date of Receipt MM / DD / YYYY 10 / 27 / 2008		
	Mailing Address 2609 S ELMWOOD AVE		Transaction ID: SA11AI.17332		
	City SIOUX FALLS	State SD	Zip Code 57105	Amount of Each Receipt this Period 45.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CITI BANK	Occupation CREDIT ANALYST			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 285.00			

C.	Full Name (Last, First, Middle Initial) MR JAY R OWEN		Date of Receipt MM / DD / YYYY 11 / 17 / 2008		
	Mailing Address 35 CYPRESS MARSH DR		Transaction ID: SA11AI.16950		
	City HILTON HEAD ISLAND	State SC	Zip Code 29926	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer ENGINEERED SYSTEMS	Occupation ENGINEER			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

SUBTOTAL of Receipts This Page (optional)	▶	595.00
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: (check only one)	PAGE 48 / 206
	<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.	Full Name (Last, First, Middle Initial) ALAN M PARK		Date of Receipt
	Mailing Address 2193 RIDGEPOINTE COURT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 17 / 2008
	City	State	Zip Code
	WALNUT CREEK	CA	94596
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17761
Name of Employer TRIMBLE NAVIGATION - LTD		Occupation SALES MANAGER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1750.00	<input type="text"/> 25.00

B.	Full Name (Last, First, Middle Initial) MRS ANNE PERRI		Date of Receipt
	Mailing Address 4975 SW 65TH AVENUE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 22 / 2008
	City	State	Zip Code
	PORTLAND	OR	97221
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17811
Name of Employer BEST BUY INC		Occupation SEC/TREAS	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00	<input type="text"/> 50.00

C.	Full Name (Last, First, Middle Initial) MRS CLARA K PETERSON		Date of Receipt
	Mailing Address 5800 SAINT CROIX AVE N APT C216		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 30 / 2008
	City	State	Zip Code
	MINNEAPOLIS	MN	55422
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17299
Name of Employer INFO REQUESTED- NOT RECD		Occupation INFO REQUESTED- NOT RECD	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	<input type="text"/> 150.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 225.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 49 / 206
(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. Full Name (Last, First, Middle Initial)
MR VAN T PITTMAN

Mailing Address 116 STONECREST RD

City State Zip Code
GREER SC 29650

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

Name of Employer Occupation
L & L CONTAINER MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.16739

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
BILL POOLE

Mailing Address 1124 SANDY RIDGE ROAD

City State Zip Code
MONROE NC 28112

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: SA11AI.16929

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR JEFFREY D PURYEAR

Mailing Address 1126 TERRACE DRIVE

City State Zip Code
BRYAN TX 77802

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

Name of Employer Occupation
TEXAS AGRILIFE RESEARCH LAB RESEARCH ASSOCIATE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: SA11AI.17521

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **575.00**

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 50 / 206
(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. Full Name (Last, First, Middle Initial)
MS VERA R REDERBURG

Mailing Address 15312 S NORMANDIE AVE APT 220

City State Zip Code
GARDENA CA 90247

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

Name of Employer Occupation
COMFORCARE SENIOR SERV COMPANION

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.17637

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MR JEFFREY F REED

Mailing Address PO BOX 201

City State Zip Code
HICKORY GROVE SC 29717

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

Name of Employer Occupation
DUKE POWER COMPANY ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.16949

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR MIKE D RISINGER

Mailing Address 421 E GREENWOOD

City State Zip Code
MORTON IL 61550

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

Name of Employer Occupation
SELF LAWYER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.17389

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **375.00**

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 51 / 206

(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.

Full Name (Last, First, Middle Initial)
MR JEFFERY ROBILLARD

Mailing Address 5028 LONGVIEW CT

City State Zip Code
WEDDINGTON NC 28104

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

Name of Employer Occupation
SEATTLE SYSTEMS SALES MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
825.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	0	8

Transaction ID: SA11AI.16928

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)
MR WAYNE R RODGERS

Mailing Address 1600 MUSTANG TRAIL

City State Zip Code
KINGWOOD TX 77339

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

Name of Employer Occupation
SELF SEMI-RETIRED ATTORNEY

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	0	8

Transaction ID: SA11AI.17512

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
MR TAMARA S ROWLAND

Mailing Address PO BOX 393

City State Zip Code
UNALASKA AK 99685

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

Name of Employer Occupation
SELF EMPLOYED COMMERCIAL FISHERMAN

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: SA11AI.17877

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

665.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 52 / 206
(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. Full Name (Last, First, Middle Initial)
MRS SHARON E RUFF

Mailing Address 6503 SOUTH AVALON AVE

City State Zip Code
SIOUX FALLS SD 57108

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

Name of Employer Occupation
SPENCER RUFF ASSOCIATES- INC OFFICE MAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	0	8

Transaction ID: SA11AI.17335

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
NATHANAEL SAINT

Mailing Address 264 MOUNTZ RD

City State Zip Code
MORGANTOWN PA 19543

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

Name of Employer Occupation
IM DESIGN ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: SA11AI.16842

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR RAYMOND L SALZMAN

Mailing Address 11151 RAWHIDE RD

City State Zip Code
LUSBY MD 20657

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: SA11AI.16860

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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 53 / 206
(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.

Full Name (Last, First, Middle Initial)
MS JEAN K SCHAAP

Mailing Address 3687 50TH ST

City State Zip Code
HOLLAND MI 49423

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

Name of Employer Occupation
HOLLAND COMM HOSPITAL RECEPTIONIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.17225

Amount of Each Receipt this Period
400.00

B.

Full Name (Last, First, Middle Initial)
HONORABLE NANCY S SCHAEFER

Mailing Address 458 YATES CIRCLE

City State Zip Code
CLARKESVILLE GA 30523

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

Name of Employer Occupation
THE ORCHARD INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.16971

Amount of Each Receipt this Period
225.00

C.

Full Name (Last, First, Middle Initial)
MS BETTY J SCHIRMER

Mailing Address PO BOX 338

City State Zip Code
KENESAW NE 68956

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

Name of Employer Occupation
RETIRED RETIRED TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.17439

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **645.00**

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: (check only one)	PAGE 54 / 206
	<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.	Full Name (Last, First, Middle Initial) MR BRUCE A SCHOEMAN	Date of Receipt MM / DD / YYYY 10 / 28 / 2008
	Mailing Address 7346 21ST AVE NW	Transaction ID: SA11AI.17327
	City State Zip Code PENNOCK MN 56279	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer INFO REQUESTED- NOT RECD	Occupation SELF	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MR GARY J SELF	Date of Receipt MM / DD / YYYY 10 / 23 / 2008
	Mailing Address 8508 YORKSHIRE DRIVE	Transaction ID: SA11AI.17517
	City State Zip Code ORANGE TX 77632	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer WAL-MART	Occupation PHARMACIST	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	

C.	Full Name (Last, First, Middle Initial) MR GARY J SELF	Date of Receipt MM / DD / YYYY 10 / 28 / 2008
	Mailing Address 8508 YORKSHIRE DRIVE	Transaction ID: SA11AI.17518
	City State Zip Code ORANGE TX 77632	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer WAL-MART	Occupation PHARMACIST	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts This Page (optional)	200.00
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 55 / 206
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
MR GARY J SELF

Mailing Address 8508 YORKSHIRE DRIVE

City ORANGE State TX Zip Code 77632

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

Name of Employer WAL-MART Occupation PHARMACIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 05 / 2008
Transaction ID: SA11AI.17519
 Amount of Each Receipt this Period 20.00

B.

Full Name (Last, First, Middle Initial)
MR PAUL V SERENIUS

Mailing Address 321 VILLAGE SQUARE DR

City CENTERVILLE State OH Zip Code 45458

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 27 / 2008
Transaction ID: SA11AI.17135
 Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
MS JUDY K SHAFER

Mailing Address 1900 PETUNIA STREET

City CEDAR PARK State TX Zip Code 78613

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

Name of Employer UNIVERSITY OF TEXAS Occupation ADMINISTRATIVE ASSOCIATE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 17 / 2008
Transaction ID: SA11AI.17537
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 140.00

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 56 / 206
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MR JOHN SHEA		Date of Receipt
	Mailing Address W1975 BAKERTOWN DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 0 6 / 2 0 0 8
	City	State	Zip Code
	SULLIVAN	WI	53178
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17258
Name of Employer SELF EMPLOYED		Occupation SELF EMPLOYED	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

B.	Full Name (Last, First, Middle Initial) MR THOMAS E SHOULDERS		Date of Receipt
	Mailing Address 204 OLIVE ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 0 / 2 0 0 8
	City	State	Zip Code
	BOONVILLE	IN	47601
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17173
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

C.	Full Name (Last, First, Middle Initial) MR & MRS WARREN SIMANDLE		Date of Receipt
	Mailing Address 2322 VISTA MADERA		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 0 5 / 2 0 0 8
	City	State	Zip Code
	SANTA BARBARA	CA	93101
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17730
Name of Employer SANTA BARBARA HIGH SCHOOL DIST		Occupation PUBLIC SCHOOL TEACHER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 275.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 375.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 206
(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.

Full Name (Last, First, Middle Initial)
MR JONATHAN SISK

Mailing Address 2048 MERCER RD

City State Zip Code
LEXINGTON KY 40511

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

Name of Employer Occupation
AUDIO AUTHORITY CORP SMALL BUSINESS OWNER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.17083

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
MR RANDALL SKOV

Mailing Address 115 TALL TIMBER CT

City State Zip Code
FAYETTEVILLE GA 30215

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

Name of Employer Occupation
US AIR FORCE WEATHER OFFICER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.16961

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
MRS ANITA SMITH

Mailing Address PO BOX 203

City State Zip Code
KAAAWA HI 96730

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.17796

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **1075.00**

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 58 / 206
(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. Full Name (Last, First, Middle Initial)
MRS DEBORAH E SMITH

Mailing Address 3360 E TERRELL BRANCH CT SE

City State Zip Code
MARIETTA GA 30067

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.16953

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MRS LINDA C SMITH

Mailing Address 17618 REXWOOD ST

City State Zip Code
LIVONIA MI 48152

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

Name of Employer Occupation
ARBOR HOSPICE RN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.17187

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
DR WILLIAM H SMITH

Mailing Address PO BOX 203

City State Zip Code
KAAAWA HI 96730

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

Name of Employer Occupation
STATE OF HAWAII TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.17797

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **100.00**

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 59 / 206
(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. Full Name (Last, First, Middle Initial)
MRS KARAL SNIDER
 Mailing Address 24923 WATERWAY CT
 City Shorewood State IL Zip Code 60404
 Date of Receipt 10 / 27 / 2008
 Transaction ID: SA11AI.17370
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer FMLY PRACTICE CONSLT & JOL-LET DRS CL Occupation MEDICAL BILLING & MSC OFFICE WORK
 Receipt For: 2008
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date 300.00

B. Full Name (Last, First, Middle Initial)
MS LONETTE SOLIS
 Mailing Address 1909 BUCKTHORN LN
 City Reston State VA Zip Code 20191
 Date of Receipt 11 / 17 / 2008
 Transaction ID: SA11AI.16859
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NORTHROP GRUMMAN Occupation ADMINISTRATIVE ASSISTANT
 Receipt For: 2008
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date 550.00

C. Full Name (Last, First, Middle Initial)
MR LAKE C SPEED
 Mailing Address 4025 OLD SALISBURY CONCORD RD
 City Kannapolis State NC Zip Code 28083
 Date of Receipt 10 / 17 / 2008
 Transaction ID: SA11AI.16926
 Amount of Each Receipt this Period 15.00
 FEC ID number of contributing federal political committee. C
 Name of Employer SELF Occupation RACE CAR DRIVER
 Receipt For: 2008
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date 590.00

SUBTOTAL of Receipts This Page (optional) ▶ 315.00
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: (check only one)	PAGE 60 / 206
	<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.	Full Name (Last, First, Middle Initial) MR LAKE C SPEED		Date of Receipt
	Mailing Address 4025 OLD SALISBURY CONCORD RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 11 / 17 / 2008
	City	State	Zip Code
	KANNAPOLIS	NC	28083
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.16927
Name of Employer SELF		Occupation RACE CAR DRIVER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 605.00	15.00

B.	Full Name (Last, First, Middle Initial) MR THOMAS SPIX		Date of Receipt
	Mailing Address 1177 MILL VALLEY ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 11 / 05 / 2008
	City	State	Zip Code
	ROCHESTER HLS	MI	48306
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17188
Name of Employer GENERAL MOTORS CORPORATION		Occupation MECHANICAL ENGINEER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	20.00

C.	Full Name (Last, First, Middle Initial) MRS TAMMY E STEINBERG		Date of Receipt
	Mailing Address 101 WINDINGHAM DR NW		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 11 / 05 / 2008
	City	State	Zip Code
	HUNTSVILLE	AL	35806
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17040
Name of Employer HARRO APOTHERAPY		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	20.00

SUBTOTAL of Receipts This Page (optional)	55.00
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 61 / 206

(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.

Full Name (Last, First, Middle Initial)
MRS BARBARA STILSON

Mailing Address 26501 BROKEN BIT LANE

City State Zip Code
LAGUNA HILLS CA 92653

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	0	8

Transaction ID: SA11AI.17709

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
MR RICHARD MOORE STIMPSON

Mailing Address 56 OAKLAND AVE

City State Zip Code
MOBILE AL 36608

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

Name of Employer Occupation
T. LEAVELL & ASSOCIATES- INC. INVESTMENT ADVISOR

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	0	8

Transaction ID: SA11AI.17051

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MR STEPHEN STUDE

Mailing Address 32797 820TH ST

City State Zip Code
BREWSTER MN 56119

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

Name of Employer Occupation
SELF EMPLOYED FARMER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	0	8

Transaction ID: SA11AI.17320

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 62 / 206
(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.

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

Mailing Address 24902 N POINTE PLACE

City State Zip Code
KATY TX 77494

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

Name of Employer AVIARA ENERGY CORPORATION Occupation ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.17516

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
DR JAMES P SYVRUD

Mailing Address 8225 BRUTON ROAD

City State Zip Code
DALLAS TX 75217

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

Name of Employer INFO REQUESTED- NOT RECD Occupation INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.17482

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MS MARGO THELEN

Mailing Address 545 LANE ROAD

City State Zip Code
WOODLAND WA 98674

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

Name of Employer WALGREENS Occupation PHARMACIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.17857

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **650.00**

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 63 / 206
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MRS GRANELLA RUTH THOMPSON		Date of Receipt
	Mailing Address 51949 JOHNSON ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	WESTON	OR	97886
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17826
Name of Employer INFO REQUESTED- NOT RECD		Occupation INFO REQUESTED- NOT RECD	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 1000.00	<input type="text"/> 500.00

B.	Full Name (Last, First, Middle Initial) MR JOHN L TIMLIN		Date of Receipt
	Mailing Address 309 N PIEDMONT ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	ARLINGTON	VA	22203
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.16892
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 305.00	<input type="text"/> 80.00

C.	Full Name (Last, First, Middle Initial) MR JOHN W TIMMONS		Date of Receipt
	Mailing Address 1444 BETHEL CHURCH RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	ELKTON	VA	22827
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.16898
Name of Employer ROCKINGHAM MEMORIAL HOSPITAL		Occupation PHYSICIAN	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 3330.00	<input type="text"/> 1000.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1580.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 206

(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.

Full Name (Last, First, Middle Initial)
MS SHIRLEY F TONN

Mailing Address 3180 MADRONA STREET

City State Zip Code
NORTH BEND OR 97459

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	0	8

Transaction ID: SA11AI.17821

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
MS CAROLE TOWNSEND

Mailing Address 30 LONE PINE WAY

City State Zip Code
COLORADO SPRINGS CO 80919

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

Name of Employer Occupation
CHAPEL HILLS ORTHODONTIC CENTER FINANCIAL SECRETARY

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: SA11AI.17581

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MRS MARIE VERMEER

Mailing Address 4529 HARRISON AVENUE

City State Zip Code
MAURICE IA 51036

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	8

Transaction ID: SA11AI.17243

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) ▶

425.00

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 65 / 206
(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.

Full Name (Last, First, Middle Initial)
MR LARRY VERSAW

Mailing Address 13868 W 3RD PLACE

City State Zip Code
GOLDEN CO 80401

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

Name of Employer LEARNING INT'L Occupation SYSTEMS ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.17566

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
MR LARRY VERSAW

Mailing Address 13868 W 3RD PLACE

City State Zip Code
GOLDEN CO 80401

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

Name of Employer LEARNING INT'L Occupation SYSTEMS ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.17565

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
MR JUSTIN D VERST

Mailing Address 331 YORK STREET

City State Zip Code
NEWPORT KY 41071

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

Name of Employer SELF - STATE OF KY CAMPBELL CNTY Occupation ATTORNEY - AT-LAW

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.17088

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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 66 / 206

(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.

Full Name (Last, First, Middle Initial)
MR GENE P VINEYARD

Mailing Address 322 COUNTRY LN

City State Zip Code
CARROLLTON GA 30117

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

Name of Employer Occupation
CONCRETE CAREERS.COM RECRUITER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: SA11AI.16960

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
MRS WILLIAM WADELL

Mailing Address 300 N VAN HOOREBEKE ROAD

City State Zip Code
JOPLIN MO 64801

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

Name of Employer Occupation
AMERICAN REHABILITATION MINISTRIES SECRETARY

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	8

Transaction ID: SA11AI.17411

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
MRS WILLIAM WADELL

Mailing Address 300 N VAN HOOREBEKE ROAD

City State Zip Code
JOPLIN MO 64801

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

Name of Employer Occupation
AMERICAN REHABILITATION MINISTRIES SECRETARY

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Transaction ID: SA11AI.17410

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) ▶

75.00

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 67 / 206
(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. Full Name (Last, First, Middle Initial)
MRS BEVERLY K WALHOF

Mailing Address 108 MICHIGAN AVE SW

City State Zip Code
ORANGE CITY IA 51041

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

Name of Employer Occupation
WELLS DAIRY COMPUTER TECHNICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2008

Transaction ID: SA11AI.17245

Amount of Each Receipt this Period
110.00

B. Full Name (Last, First, Middle Initial)
MR JIMMY D WARREN

Mailing Address 155 ALAMEDA DR

City State Zip Code
MERRITT ISLAND FL 32952

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

Name of Employer Occupation
INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 13 / 2008

Transaction ID: SA11AI.17015

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR SHARON J WERNER

Mailing Address 6391 STATE ROUTE 655

City State Zip Code
BELLEVILLE PA 17004

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

Name of Employer Occupation
INFO REQUESTED- NOT RECD PROPERTY MANAGEMENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2008

Transaction ID: SA11AI.16803

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶ **460.00**

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: (check only one)	PAGE 68 / 206
	<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.	Full Name (Last, First, Middle Initial) MR ROBERT E WETSEL		Date of Receipt
	Mailing Address 1809 COLLEGE AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 2 / 2 0 0 8
	City	State	Zip Code
	HARRISONBURG	VA	22802
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.16896
Name of Employer INFO REQUESTED- NOT RECD		Occupation INFO REQUESTED- NOT RECD	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	50.00

B.	Full Name (Last, First, Middle Initial) MRS CHRISTINE A WHITCOMB		Date of Receipt
	Mailing Address 9609 PARKEDGE DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 7 / 2 0 0 8
	City	State	Zip Code
	ALLISON PARK	PA	15101
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.16789
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	250.00

C.	Full Name (Last, First, Middle Initial) MRS DONALD A WHITE, JR		Date of Receipt
	Mailing Address 9412 ROCKY HILLS DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 2 / 2 0 0 8
	City	State	Zip Code
	CORDOVA	TN	38018
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17063
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.00	50.00

SUBTOTAL of Receipts This Page (optional)	350.00
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 69 / 206
(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. Full Name (Last, First, Middle Initial)
MRS DONALD A WHITE, JR
 Mailing Address 9412 ROCKY HILLS DR
 City State Zip Code
 CORDOVA TN 38018
 Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 1 3 / 2 0 0 8
Transaction ID: SA11AI.17064
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 475.00

B. Full Name (Last, First, Middle Initial)
MRS LOIS WIERENGA
 Mailing Address 3442 OLDERIDGE DR NE
 City State Zip Code
 GRAND RAPIDS MI 49525
 Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 0 5 / 2 0 0 8
Transaction ID: SA11AI.17236
 Amount of Each Receipt this Period
 25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GRAND RAPIDS PUBLIC SCHOOLS TEACHER
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

C. Full Name (Last, First, Middle Initial)
MRS JOYCE E WILBER
 Mailing Address 931 N ARLINGTON
 City State Zip Code
 INDIANAPOLIS IN 46219
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 1 / 2 0 0 8
Transaction ID: SA11AI.17148
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 THOMSON CONSUMER ELECTRONICS ELECTRONICS ENGINEER
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 675.00

SUBTOTAL of Receipts This Page (optional) ► **325.00**
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 70 / 206
(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. Full Name (Last, First, Middle Initial)
MS GAYLE WITHNELL

Mailing Address 3691 RIVERCREST DRIVE N

City State Zip Code
KEIZER OR 97303

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

Name of Employer Occupation
INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.17813

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MS DOROTHY V WRAY

Mailing Address 4960 ORTEGA ROAD

City State Zip Code
LAS CRUCES NM 88012

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.17626

Amount of Each Receipt this Period
140.00

C. Full Name (Last, First, Middle Initial)
MRS CAROLE D WRIGHT

Mailing Address 940 HAMILTON RIDGE ROAD

City State Zip Code
KNOXVILLE TX 78631

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.17540

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **265.00**

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 71 / 206
(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.

Full Name (Last, First, Middle Initial)
JANE WRIGHT

Mailing Address 6505 TRECK CIRCLE

City BIRMINGHAM State AL Zip Code 35235

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

Name of Employer NAJJAR DENABURG PC Occupation PARALEGAL

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 28 / 2008
Transaction ID: SA11AI.17034
 Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
CHARLES S WUEST

Mailing Address 25512 VINECHASE DR

City PORTER State TX Zip Code 77365

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

Name of Employer CURRIN WUEST MIELKE PAUL & KNAPP PL Occupation ATTORNEY

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 18 / 2008
Transaction ID: SA11AI.17513
 Amount of Each Receipt this Period: 50.00

C.

Full Name (Last, First, Middle Initial)
MR GREG D YOUNG

Mailing Address 38305 JEFFERSON STREET

City INDIO State CA Zip Code 92203

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

Name of Employer W D YOUNG Occupation MANAGEMENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 07 / 2008
Transaction ID: SA11AI.17689
 Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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 72 / 206
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MRS OLETHA E YOUNG		Date of Receipt
	Mailing Address 730 W JEFFERSON ST APT 242		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	MORTON	IL	61550
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17390
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 455.00	

B.	Full Name (Last, First, Middle Initial) MRS JUNE L ZEIGLER		Date of Receipt
	Mailing Address 2261 WARREN DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	MORRISTOWN	TN	37814
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17057
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 30.00
		<input type="text"/> 425.00	

C.	Full Name (Last, First, Middle Initial) MS ELSIE ZUERCHER		Date of Receipt
	Mailing Address 1556 SOUTHWEST SANTA FE LAKE RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	TOWANDA	KS	67144
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17423
Name of Employer HOUSEWORK PRIVATE HOMES		Occupation HOUSEKEEPER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 315.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 105.00
TOTAL This Period (last page this line number only)	<input type="text"/> 47207.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 206

(check only one)

<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
BB& T Bank

Mailing Address 2700 S. Quincy Street

City State Zip Code
Arlington VA 22206

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13055.99

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA17.17889

Amount of Each Receipt this Period

2912.90

INTEREST INCOME

B.

Full Name (Last, First, Middle Initial)
BB& T Bank

Mailing Address 2700 S. Quincy Street

City State Zip Code
Arlington VA 22206

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13486.38

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA17.17885

Amount of Each Receipt this Period

430.39

INTEREST INCOME

C.

Full Name (Last, First, Middle Initial)
BB& T Bank

Mailing Address 2700 S. Quincy Street

City State Zip Code
Arlington VA 22206

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14025.85

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: SA17.17888

Amount of Each Receipt this Period

539.47

INTEREST INCOME

SUBTOTAL of Receipts This Page (optional) ▶

3882.76

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 74 / 206
(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.

Full Name (Last, First, Middle Initial)
BB& T Bank

Mailing Address 2700 S. Quincy Street

City State Zip Code
Arlington VA 22206

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16739.03

Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 1 3 / 2 0 0 8

Transaction ID: SA17.17886

Amount of Each Receipt this Period
2713.18

INTEREST INCOME

SUBTOTAL of Receipts This Page (optional)	▶	2713.18
TOTAL This Period (last page this line number only)	▶	6595.94

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

A.	Full Name (Last, First, Middle Initial) DAN ALLOTT	Transaction ID: SB21B.17949
	Mailing Address 2800 S. SHIRLINGTON ROAD #930	Date of Disbursement 10 / 29 / 2008
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 3500.00
	Purpose of Disbursement WRITING SERVICES	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:	

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.17892
	Mailing Address P.O. Box 981540	Date of Disbursement 10 / 16 / 2008
	City El Paso State TX Zip Code 79998	Amount of Each Disbursement this Period 1.63
	Purpose of Disbursement CREDIT CARD PROCESSING	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:	

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.17893
	Mailing Address P.O. Box 981540	Date of Disbursement 10 / 18 / 2008
	City El Paso State TX Zip Code 79998	Amount of Each Disbursement this Period 0.98
	Purpose of Disbursement CREDIT CARD PROCESSING	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)	3502.61
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

<p>A. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 981540</p> <p>City El Paso State TX Zip Code 79998</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17895</p> <p>Date of Disbursement 10 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 1.63</p>
<p>B. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 981540</p> <p>City El Paso State TX Zip Code 79998</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17896</p> <p>Date of Disbursement 10 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 6.50</p>
<p>C. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 981540</p> <p>City El Paso State TX Zip Code 79998</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17909</p> <p>Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 4.50</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12.63

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 981540</p> <p>City El Paso State TX Zip Code 79998</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17913</p> <p>Date of Disbursement 11 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 1.63</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 981540</p> <p>City El Paso State TX Zip Code 79998</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17914</p> <p>Date of Disbursement 11 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 721.07</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 981540</p> <p>City El Paso State TX Zip Code 79998</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17918</p> <p>Date of Disbursement 11 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 0.98</p>

SUBTOTAL of Disbursements This Page (optional) ▶

723.68

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

A.	Full Name (Last, First, Middle Initial) Authorize.net	Transaction ID: SB21B.17910 Date of Disbursement 11 / 04 / 2008
	Mailing Address 808 East Utah Valley Drive	Amount of Each Disbursement this Period 60.15
	City American Fork State UT Zip Code 84003	
	Purpose of Disbursement CREDIT CARD PROCESSING	
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) GARY BAUER	Transaction ID: SB21B.17952 Date of Disbursement 10 / 29 / 2008
	Mailing Address 2800 SHIRLINGTON ROAD #930	Amount of Each Disbursement this Period 4500.00
	City ARLINGTON State VA Zip Code 22206	
	Purpose of Disbursement PAC - CONSULTING POLITICAL FUNDRAISER	
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) BB& T Bank	Transaction ID: SB21B.17894 Date of Disbursement 10 / 21 / 2008
	Mailing Address 2700 S. Quincy Street	Amount of Each Disbursement this Period 147.43
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement BANK FEES	
	Candidate Name	Category/Type
	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)	▶	4707.58
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

A.	Full Name (Last, First, Middle Initial) BB& T Bank	Transaction ID: SB21B.17916
	Mailing Address 2700 S. Quincy Street	Date of Disbursement MM / DD / YYYY 11 / 17 / 2008
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period 1211.72
	Purpose of Disbursement CREDIT CARD PROCESSING	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) ▼

B.	Full Name (Last, First, Middle Initial) BB& T Bank	Transaction ID: SB21B.17919
	Mailing Address 2700 S. Quincy Street	Date of Disbursement MM / DD / YYYY 11 / 21 / 2008
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period 137.34
	Purpose of Disbursement BANK FEES	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) ▼

C.	Full Name (Last, First, Middle Initial) CHOI COMPANIES	Transaction ID: SB21B.17947
	Mailing Address 5999 STEVENSON AVE #310	Date of Disbursement MM / DD / YYYY 10 / 29 / 2008
	City ALEXANDRIA State VA Zip Code 22304	Amount of Each Disbursement this Period 2536.02
	Purpose of Disbursement RENT	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)	3885.08
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

A. Full Name (Last, First, Middle Initial)
CITIZENS FOR STEPHANIE MCCLLOUD

Mailing Address 14 EAST GAY ST

City State Zip Code
COLUMBUS OH 43215

Purpose of Disbursement
CONTRIBUTION - COUNTY TREASURER

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.17974
Date of Disbursement

10 / 30 / 2008

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
COVAD COMMUNICATIONS

Mailing Address P.O. BOX 39000

City State Zip Code
SAN FRANCISCO CA 94139

Purpose of Disbursement
COMPUTER SERVICES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.17948
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

2.00

C. Full Name (Last, First, Middle Initial)
COVAD COMMUNICATIONS

Mailing Address P.O. BOX 39000

City State Zip Code
SAN FRANCISCO CA 94139

Purpose of Disbursement
COMPUTER SERVICES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.17968
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

104.45

SUBTOTAL of Disbursements This Page (optional) ▶

1106.45

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

<p>A. Full Name (Last, First, Middle Initial) DEER PARK</p> <p>Mailing Address P.O. BOX 52271</p> <p>City PHOENIX State AZ Zip Code 85072</p> <p>Purpose of Disbursement OFFICE EXPENSE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.17969</p> <p>Date of Disbursement 11 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 20.85</p>
<p>B. Full Name (Last, First, Middle Initial) Discover Financial</p> <p>Mailing Address P.O. Box 8181</p> <p>City Gray State TN Zip Code 37615</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.17897</p> <p>Date of Disbursement 10 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 70.15</p>
<p>C. Full Name (Last, First, Middle Initial) Discover Financial</p> <p>Mailing Address P.O. Box 8181</p> <p>City Gray State TN Zip Code 37615</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.17898</p> <p>Date of Disbursement 10 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 15.58</p>

SUBTOTAL of Disbursements This Page (optional) ▶

106.58

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

A.	Full Name (Last, First, Middle Initial) Discover Financial	Transaction ID: SB21B.17899 Date of Disbursement
	Mailing Address P.O. Box 8181	<input type="text" value="10"/> <input type="text" value="31"/> / <input type="text" value="2008"/>
	City Gray State TN Zip Code 37615	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PROCESSING	<input type="text" value="4.79"/>
	Candidate Name	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Discover Financial	Transaction ID: SB21B.17900 Date of Disbursement
	Mailing Address P.O. Box 8181	<input type="text" value="10"/> <input type="text" value="31"/> / <input type="text" value="2008"/>
	City Gray State TN Zip Code 37615	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PROCESSING	<input type="text" value="13.61"/>
	Candidate Name	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Discover Financial	Transaction ID: SB21B.17901 Date of Disbursement
	Mailing Address P.O. Box 8181	<input type="text" value="10"/> <input type="text" value="31"/> / <input type="text" value="2008"/>
	City Gray State TN Zip Code 37615	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PROCESSING	<input type="text" value="0.73"/>
	Candidate Name	Category/ Type
	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)

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

A.	Full Name (Last, First, Middle Initial) Discover Financial	Transaction ID: SB21B.17902 Date of Disbursement
	Mailing Address P.O. Box 8181	<input type="text" value="10"/> <input type="text" value="31"/> / <input type="text" value="2008"/>
	City Gray State TN Zip Code 37615	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PROCESSING	<input type="text" value="1.35"/>
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Discover Financial	Transaction ID: SB21B.17903 Date of Disbursement
	Mailing Address P.O. Box 8181	<input type="text" value="10"/> <input type="text" value="31"/> / <input type="text" value="2008"/>
	City Gray State TN Zip Code 37615	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PROCESSING	<input type="text" value="33.95"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Discover Financial	Transaction ID: SB21B.17904 Date of Disbursement
	Mailing Address P.O. Box 8181	<input type="text" value="10"/> <input type="text" value="31"/> / <input type="text" value="2008"/>
	City Gray State TN Zip Code 37615	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PROCESSING	<input type="text" value="25.70"/>
	Candidate Name	Category/Type
	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)	<input type="text" value="61.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Discover Financial</p> <p>Mailing Address P.O. Box 8181</p> <p>City Gray State TN Zip Code 37615</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17905</p> <p>Date of Disbursement 10 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 27.60</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Discover Financial</p> <p>Mailing Address P.O. Box 8181</p> <p>City Gray State TN Zip Code 37615</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17906</p> <p>Date of Disbursement 10 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 2.80</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Discover Financial</p> <p>Mailing Address P.O. Box 8181</p> <p>City Gray State TN Zip Code 37615</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17907</p> <p>Date of Disbursement 10 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 0.48</p>

SUBTOTAL of Disbursements This Page (optional) ▶

30.88

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Discover Financial</p> <p>Mailing Address P.O. Box 8181</p> <p>City Gray State TN Zip Code 37615</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17911</p> <p>Date of Disbursement 11 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 9.95</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Discover Financial</p> <p>Mailing Address P.O. Box 8181</p> <p>City Gray State TN Zip Code 37615</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17915</p> <p>Date of Disbursement 11 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 0.78</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Discover Financial</p> <p>Mailing Address P.O. Box 8181</p> <p>City Gray State TN Zip Code 37615</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17917</p> <p>Date of Disbursement 11 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 5.50</p>

SUBTOTAL of Disbursements This Page (optional) ▶

16.23

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) FEDERAL EXPRESS</p> <p>Mailing Address P.O. BOX 1140</p> <p>City MEMPHIS State TN Zip Code 38101</p> <p>Purpose of Disbursement SHIPPING FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17951</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="16.41"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) FEDERAL EXPRESS</p> <p>Mailing Address P.O. BOX 1140</p> <p>City MEMPHIS State TN Zip Code 38101</p> <p>Purpose of Disbursement SHIPPING FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17958</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="38.74"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) FEDERAL EXPRESS</p> <p>Mailing Address P.O. BOX 1140</p> <p>City MEMPHIS State TN Zip Code 38101</p> <p>Purpose of Disbursement SHIPPING FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17962</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="104.71"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="159.86"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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

A.	Full Name (Last, First, Middle Initial) GARD FOR CONGRESS	Transaction ID: SB21B.17976
	Mailing Address PO BOX 277	Date of Disbursement 10 / 30 / 2008
	City GREEN BAY State WI Zip Code 54305	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement CONTRIBUTION	Category/ Type
	Candidate Name GARD FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) INDEPENDENT PLAN COORDINATORS	Transaction ID: SB21B.17963
	Mailing Address P.O. BOX 2899	Date of Disbursement 11 / 12 / 2008
	City VIRGINIA BEACH State VA Zip Code 23450	Amount of Each Disbursement this Period 22.50
	Purpose of Disbursement PLAN FEES	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) ▼

C.	Full Name (Last, First, Middle Initial) INTEGRAM	Transaction ID: SB21B.17970
	Mailing Address 8421 HILLTOP ROAD	Date of Disbursement 10 / 29 / 2008
	City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period 4442.04
	Purpose of Disbursement PAC - DIRECT MAIL PRODUCTION	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)	9464.54
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"/> 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

A.	Full Name (Last, First, Middle Initial) IRON MOUNTAIN	Transaction ID: SB21B.17964 Date of Disbursement 11 / 12 / 2008
	Mailing Address 745 ATLANTIC AVE	Amount of Each Disbursement this Period 228.41
	City BOSTON State MA Zip Code 02111	
	Purpose of Disbursement STORAGE FEES Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) LEXIS NEXIS	Transaction ID: SB21B.17965 Date of Disbursement 11 / 12 / 2008
	Mailing Address P.O. BOX 7247-7090	Amount of Each Disbursement this Period 350.00
	City PHILADELPHIA State PA Zip Code 19170	
	Purpose of Disbursement DUES AND SUBSCRIPTIONS Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) LPS	Transaction ID: SB21B.17954 Date of Disbursement 10 / 29 / 2008
	Mailing Address P.O. BOX 2325	Amount of Each Disbursement this Period 1020.47
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement PAC - DATA PROCESSING SERVICES Candidate Name	Category/Type
	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)	1598.88
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

A.	Full Name (Last, First, Middle Initial) LPS	Transaction ID: SB21B.17959 Date of Disbursement 10 / 29 / 2008
	Mailing Address P.O. BOX 2325	Amount of Each Disbursement this Period 659.52
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement PAC - DATA PROCESSING SERVICES	
	Candidate Name	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) LPS	Transaction ID: SB21B.17966 Date of Disbursement 11 / 12 / 2008
	Mailing Address P.O. BOX 2325	Amount of Each Disbursement this Period 653.90
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement PAC - DATA PROCESSING SERVICES	
	Candidate Name	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) BILL MOELLER	Transaction ID: SB21B.17946 Date of Disbursement 10 / 29 / 2008
	Mailing Address 2800 SHIRLINGTON ROAD #930	Amount of Each Disbursement this Period 1250.00
	City ARLINGTON State VA Zip Code 22206	
	Purpose of Disbursement PAC - CONSULTING POLITICAL RESEARCHER	
	Candidate Name	Category/ Type
	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)	2563.42
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)

PAGE 90 / 206

<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

A.	Full Name (Last, First, Middle Initial) SPRINT	Transaction ID: SB21B.17967 Date of Disbursement 11 / 12 / 2008
	Mailing Address P.O. BOX 530503	Amount of Each Disbursement this Period 21.27
	City ATLANTA State GA Zip Code 30353	
	Purpose of Disbursement TELEPHONE 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) ▼

B.	Full Name (Last, First, Middle Initial) THE LUKENS COMPANY	Transaction ID: SB21B.17971 Date of Disbursement 10 / 29 / 2008
	Mailing Address 2800 SHIRLINGTON ROAD #900	Amount of Each Disbursement this Period 3325.00
	City ARLINGTON State VA Zip Code 22206	
	Purpose of Disbursement PAC - DIRECT MAIL CONSULTING	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) ▼

C.	Full Name (Last, First, Middle Initial) THE LUKENS COMPANY	Transaction ID: SB21B.17981 Date of Disbursement 11 / 12 / 2008
	Mailing Address 2800 SHIRLINGTON ROAD #900	Amount of Each Disbursement this Period 2000.00
	City ARLINGTON State VA Zip Code 22206	
	Purpose of Disbursement PAC - DIRECT MAIL CONSULTING	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)	5346.27
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"/> 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

A.

Full Name (Last, First, Middle Initial)
THE PRINTING EXPRESS

Transaction ID: SB21B.17972

Date of Disbursement

Mailing Address 1832 MAIN STREET

10 / 29 / 2008

City HARRISONBURG State VA Zip Code 22801

Amount of Each Disbursement this Period

6209.29

Purpose of Disbursement
PAC - DIRECT MAIL PRODUCTION

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
THE PRINTING EXPRESS

Transaction ID: SB21B.17983

Date of Disbursement

Mailing Address 1832 MAIN STREET

11 / 13 / 2008

City HARRISONBURG State VA Zip Code 22801

Amount of Each Disbursement this Period

1485.84

Purpose of Disbursement
PAC - DIRECT MAIL PRODUCTION

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
U.S. POSTMASTER

Transaction ID: SB21B.17920

Date of Disbursement

Mailing Address MAIN POST OFFICE

10 / 24 / 2008

City WASHINGTON State DC Zip Code 20000

Amount of Each Disbursement this Period

750.00

Purpose of Disbursement
PAC - REPLENISH BRE ACCOUNT

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

8445.13

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

A.	Full Name (Last, First, Middle Initial) UNITED BANK <hr/> Mailing Address 4501 DALY DRIVE <hr/> City CHANTILLY State VA Zip Code 20151 <hr/> Purpose of Disbursement CREDIT CARD PROCESSING Candidate Name Category/Type <hr/> 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:	Transaction ID: SB21B.17908 Date of Disbursement 10 / 31 / 2008 <hr/> Amount of Each Disbursement this Period 118.75
B.	Full Name (Last, First, Middle Initial) UNITED BANK <hr/> Mailing Address 4501 DALY DRIVE <hr/> City CHANTILLY State VA Zip Code 20151 <hr/> Purpose of Disbursement CREDIT CARD PROCESSING Candidate Name Category/Type <hr/> 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:	Transaction ID: SB21B.17912 Date of Disbursement 11 / 04 / 2008 <hr/> Amount of Each Disbursement this Period 135.22
C.	Full Name (Last, First, Middle Initial) UNITED BANK <hr/> Mailing Address 4501 DALY DRIVE <hr/> City CHANTILLY State VA Zip Code 20151 <hr/> Purpose of Disbursement DEPOSIT TICKETS Candidate Name Category/Type <hr/> 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:	Transaction ID: SB21B.17921 Date of Disbursement 11 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 32.54

SUBTOTAL of Disbursements This Page (optional) ▶

286.51

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

<p>A. Full Name (Last, First, Middle Initial) Dorie Velezis</p> <p>Mailing Address 2800 S. Shirlington Road, #930</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement ACCOUNTING SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17950</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1125.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) VERIZON</p> <p>Mailing Address P.O. BOX 17577</p> <p>City BALTIMORE State MD Zip Code 21297</p> <p>Purpose of Disbursement TELEPHONE SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17956</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="434.31"/></p>
<p>C. Full Name (Last, First, Middle Initial) DEAN VIRAG</p> <p>Mailing Address 14039 WESTWIND LANE</p> <p>City CULPEPER State VA Zip Code 22701</p> <p>Purpose of Disbursement COMPUTER SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.17961</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="2059.31"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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)

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<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

A. Full Name (Last, First, Middle Initial)
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

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.17960

Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

1785.16

B. Full Name (Last, First, Middle Initial)
WILLIAM RUSSELL FOR CONGRESS

Mailing Address PO BOX 630

City JOHNSTOWN State PA Zip Code 15907

Purpose of Disbursement
CONTRIBUTION

Candidate Name
WILLIAM RUSSELL FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: PA District: 12

Transaction ID: SB21B.17944

Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ►

4285.16

TOTAL This Period (last page this line number only) ►

48380.93

**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)

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<input type="checkbox"/> 21b	<input checked="" 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

A.

Full Name (Last, First, Middle Initial)
CAMPAIGN FOR WORKING FAMILIES

Transaction ID: SB22.17978

Date of Disbursement

Mailing Address 2800 Shirlington Road, Suite 930

^M 1	^M 0	/	^D 3	^D 0	/	^Y 2	^Y 0	^Y 0	^Y 8
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City State Zip Code
Arlington VA 22206

Amount of Each Disbursement this Period

10000.00

Purpose of Disbursement
TRANSFER-EXCESS CONT BROWN ORIG 10/7/08

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

10000.00

TOTAL This Period (last page this line number only) ►

10000.00

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 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

<p>A. Full Name (Last, First, Middle Initial) BLAINE FOR CONGRESS 2008</p> <p>Mailing Address PO Box 1526</p> <p>City Columbia State MO Zip Code 65205</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name BLAINE FOR CONGRESS 2008</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MO District: 09</p>	<p>Transaction ID: SB23.17942</p> <p>Date of Disbursement 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) COFFMAN FOR CONGRESS INC.</p> <p>Mailing Address 9249 South Broadway Blvd. #200-501</p> <p>City Highlands Ranch State CO Zip Code 80129</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name COFFMAN FOR CONGRESS INC.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CO District: 06</p>	<p>Transaction ID: SB23.17922</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT SYDNEY HAY TO CONGRESS</p> <p>Mailing Address PO BOX 17576</p> <p>City MUNDS PARK State AZ Zip Code 86017</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name COMMITTEE TO ELECT SYDNEY HAY TO CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AZ District: 01</p>	<p>Transaction ID: SB23.17925</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

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 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

A. Full Name (Last, First, Middle Initial) GUTHRIE FOR CONGRESS <hr/> Mailing Address PO BOX 9639 <hr/> City BOWLING GREEN State KY Zip Code 42102 <hr/> Purpose of Disbursement CONTRIBUTION <hr/> Candidate Name GUTHRIE FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.17928 Date of Disbursement 10 / 16 / 2008
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) JOHN SHADEGGS FRIENDS <hr/> Mailing Address PO BOX 45444 <hr/> City Phoenix State AZ Zip Code 85064 <hr/> Purpose of Disbursement CONTRIBUTION <hr/> Candidate Name JOHN SHADEGGS FRIENDS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 03 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.17930 Date of Disbursement 10 / 16 / 2008
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) LEE TERRY FOR CONGRESS <hr/> Mailing Address P.O. Box 540098 <hr/> City Omaha State NE Zip Code 68154 <hr/> Purpose of Disbursement CONTRIBUTION <hr/> Candidate Name LEE TERRY FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.17932 Date of Disbursement 10 / 16 / 2008
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

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)

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<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

<p>A. Full Name (Last, First, Middle Initial) MIKE PENCE COMMITTEE</p> <p>Mailing Address P. O. Box 408</p> <p>City Anderson State IN Zip Code 46015</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name MIKE PENCE COMMITTEE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 06</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17934</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) OLSON FOR CONGRESS COMMITTEE</p> <p>Mailing Address PO Box 16381</p> <p>City Sugar Land State TX Zip Code 77496</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name OLSON FOR CONGRESS COMMITTEE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17936</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE</p> <p>Mailing Address PO BOX 1131</p> <p>City ANDERSON State IN Zip Code 46015</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.17938</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

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)

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<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

A.	Full Name (Last, First, Middle Initial) SOUDER FOR CONGRESS INC.		Transaction ID: SB23.17940	
	Mailing Address P.O. BOX 40233 P.O. BOX 40233		Date of Disbursement MM / DD / YYYY 10 / 16 / 2008	
	City FORT WAYNE	State IN	Zip Code 46804	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement CONTRIBUTION		Category/ Type	
	Candidate Name SOUDER FOR CONGRESS INC.			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: IN	District: 03		

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

TOTAL This Period (last page this line number only) ►

42500.00

**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)

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<input 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 checked="" 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

A.	Full Name (Last, First, Middle Initial) RICHARD BOND	Transaction ID: SB28A.17986
	Mailing Address 4226 S CRESTLINE ST	Date of Disbursement 10 / 21 / 2008
	City SPOKANE State WA Zip Code 99203	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement REFUND OF CONTRIBUTION 9/3/08	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
	State: District:	<input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) MR WILLIAM T MILLS, III	Transaction ID: SB28A.17979
	Mailing Address PO BOX 52592	Date of Disbursement 10 / 29 / 2008
	City LAFAYETTE State LA Zip Code 70505	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement REFUND OF EXCESS CONT ORIG 9/11/08	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

4500.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AMERICAN VALUES			Nature of Debt (Purpose): LIST RENTAL
Mailing Address 2800 SHIRLINGTON RD #950			
City ARLINGTON	State VA	ZIP Code 22206	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.17988	
Amount Incurred This Period 7297.79	Payment This Period 0.00	Outstanding Balance at Close of This Period 7297.79	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAPITOL ADVANTAGE			Nature of Debt (Purpose): DUES AND SUBSCRIPTIONS
Mailing Address P.O. BOX 2018			
City MERRIFIELD	State VA	ZIP Code 22116	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.17990	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00	

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

Outstanding Balance Beginning This Period 223.11		Transaction ID: SD10.4694	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 223.11	

1) SUBTOTALS This Period This Page (optional).....	9020.90
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)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor INTEGRAM			Nature of Debt (Purpose): PAC - DIRECT MAIL PRODUCT- ION
Mailing Address 8421 HILLTOP ROAD			
City FAIRFAX	State VA	ZIP Code 22031	

Outstanding Balance Beginning This Period 4442.04		Transaction ID: SD10.16720	
Amount Incurred This Period 0.00	Payment This Period 4442.04	Outstanding Balance at Close of This Period 0.00	

B. 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 ELKRIDGE	State MD	ZIP Code 21075	

Outstanding Balance Beginning This Period 2320.90		Transaction ID: SD10.4696	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2320.90	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LUKENS COMPANY			Nature of Debt (Purpose): PAC - DIRECT MAIL CONSULT- ING
Mailing Address 2800 SHIRLINGTON ROAD #900			
City ARLINGTON	State VA	ZIP Code 22206	

Outstanding Balance Beginning This Period 3325.00		Transaction ID: SD10.16723	
Amount Incurred This Period 0.00	Payment This Period 3325.00	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	2320.90
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)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LUKENS COMPANY			Nature of Debt (Purpose): PAC - DIRECT MAIL CONSULT- ING
Mailing Address 2800 SHIRLINGTON ROAD #900			
City ARLINGTON	State VA	ZIP Code 22206	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.17980	
Amount Incurred This Period <input type="text" value="2000.00"/>	Payment This Period <input type="text" value="2000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE PRINTING EXPRESS			Nature of Debt (Purpose): PAC - DIRECT MAIL PRODUCT- ION
Mailing Address 1832 MAIN STREET			
City HARRISONBURG	State VA	ZIP Code 22801	

Outstanding Balance Beginning This Period <input type="text" value="6209.29"/>		Transaction ID: SD10.16724	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="6209.29"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE PRINTING EXPRESS			Nature of Debt (Purpose): PAC - DIRECT MAIL PRODUCT- ION
Mailing Address 1832 MAIN STREET			
City HARRISONBURG	State VA	ZIP Code 22801	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.17982	
Amount Incurred This Period <input type="text" value="1485.84"/>	Payment This Period <input type="text" value="1485.84"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE PRINTING EXPRESS			Nature of Debt (Purpose): PAC - DIRECT MAIL PRODUCT- ION
Mailing Address 1832 MAIN STREET			
City HARRISONBURG	State VA	ZIP Code 22801	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.17991	
Amount Incurred This Period 2459.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2459.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor TIGRE STRATEGIES			Nature of Debt (Purpose): PAC - FAX BLAST SERVICES
Mailing Address 4820 WEST SAN JOSE ST			
City TAMPA	State FL	ZIP Code 33629	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.17992	
Amount Incurred This Period 1312.43	Payment This Period 0.00	Outstanding Balance at Close of This Period 1312.43	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor VERIZON			Nature of Debt (Purpose): TELEPHONE
Mailing Address P.O. BOX 17577			
City BALTIMORE	State MD	ZIP Code 21297	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.17994	
Amount Incurred This Period 440.03	Payment This Period 0.00	Outstanding Balance at Close of This Period 440.03	

1) SUBTOTALS This Period This Page (optional).....	4211.46
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 105 / 206	
	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 WASHINGTON INTELLIGENCE BUREAU			Nature of Debt (Purpose): PAC - CAGING AND DATA PROCESSING SERVICE
Mailing Address 4128 PEPSI PLACE			
City CHANTILLY	State VA	ZIP Code 20151	

Outstanding Balance Beginning This Period		Transaction ID: SD10.17995	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
2098.45	0.00	2098.45	

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2) TOTALS This Period (last page this line number only).....	17651.71
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)	17651.71

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Form/Schedule: **SB22**

Transaction ID: **SB22.17978**

TRANSFER EXCESS CONTRIBUTION FROM DALE BROWN ORIGINAL CONTRIBUTION DATE 10/7/08 TO NO
