

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

CAMPAIGN FOR WORKING FAMILIES

ADDRESS (number and street) ▼

2800 Shirlington Road, Suite 930

Check if different than previously reported. (ACC)

Arlington

VA

22206

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input checked="" type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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

Type or Print Name of Treasurer Dorie Velezis

Signature of Treasurer Dorie Velezis

[Electronically Filed]

Date

/ /

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

Office Use Only

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CAMPAIGN FOR WORKING FAMILIES

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="1278844.43"/>	<input type="text" value="1278844.43"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1390533.70"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="12776.35"/>	<input type="text" value="550006.11"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1403310.05"/>	<input type="text" value="1828850.54"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="261357.66"/>	<input type="text" value="686898.15"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1141952.39"/>	<input type="text" value="1141952.39"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="5499.32"/>	

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: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9970.04	297372.50
(ii) Unitemized	2806.31	164765.15
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12776.35	462137.65
(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)	12776.35	462137.65
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	118.46
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	87750.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	87750.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	12776.35	550006.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	12776.35	462256.11

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	84750.00
(ii) Non-Federal Share.....	0.00	87750.00
(b) Other Federal Operating Expenditures	9652.05	169745.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	9652.05	342245.54
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	55000.00
24. Independent Expenditures (use Schedule E)	244205.61	263092.61
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1560.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1560.00
29. Other Disbursements	5000.00	25000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	261357.66	686898.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	261357.66	599148.15

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12776.35	462137.65
34. Total Contribution Refunds (from Line 28(d))	0.00	1560.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12776.35	460577.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	9652.05	254495.54
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9652.05	254495.54

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

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

FOR LINE NUMBER: PAGE 6 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR CHARLES D AYRES
 Full Name (Last, First, Middle Initial)
 Mailing Address 4911 CASA ORO DR
 City YORBA LINDA State CA Zip Code 92886
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : SA11AI.61026
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. DAVID BAIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1000 PECAN DR
 City MCKINNEY State TX Zip Code 75069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORWIN ENGINEERING INCORPORATED Occupation ENGINEER
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2012
Transaction ID : SA11AI.60982
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

C. MR MATTHEW C BAKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 3630 KACIN CT
 City RICHFIELD State WI Zip Code 53076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation COMPUTER MAINTENANCE
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : SA11AI.60954
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.61026

0103804-0000121

Form/Schedule: SA11AI

Transaction ID: SA11AI.60982

0104630-0000078

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60954

0103827-0000051

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 9 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR DAVID J BATLUCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 17 MULLIGAN DR
 City READING State PA Zip Code 19606
 FEC ID number of contributing federal political committee. C
 Name of Employer HAVEN BEHAVIORAL HOSPITAL Occupation PHYSICIAN
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 02 / 2012
Transaction ID : SA11AI.60914
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

B. MR ANTHONY R BIANCHI
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 HACKBERRY RIDGE DR
 City MCKINNEY State TX Zip Code 75070
 FEC ID number of contributing federal political committee. C
 Name of Employer REMAX Occupation REALTOR
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : SA11AI.60983
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

C. DR GARY R BISHOP
 Full Name (Last, First, Middle Initial)
 Mailing Address 15144 LARRY ST
 City POWAY State CA Zip Code 92064
 FEC ID number of contributing federal political committee. C
 Name of Employer RIVERSIDE COUNTY Occupation PHARMACIST
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 05 / 2012
Transaction ID : SA11AI.61018
 Amount of Each Receipt this Period
 35.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
TOTAL This Period (last page this line number only)..... ▶

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60914

0002355-0000008

Form/Schedule: SA11AI

Transaction ID: SA11AI.60983

0103533-0000079

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.61018

0009108-0000114

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR KENNETH N BLACKBURN
Full Name (Last, First, Middle Initial)

Mailing Address 10 SHALLOWBROOK DRIVE

City O FALLON State IL Zip Code 62269

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

Name of Employer AIRTRAN AIRWAYS Occupation PILOT

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 10 / 15 / 2012
Transaction ID : SA11AI.60963

Amount of Each Receipt this Period 100.00

CONTRIBUTION

B. MR RONALD J BOOMSTRA
Full Name (Last, First, Middle Initial)

Mailing Address 585 BIRCHWOOD ST

City JACKSON State MI Zip Code 49203

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

Name of Employer RETIRED Occupation RETIRED MILITARY

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 15 / 2012
Transaction ID : SA11AI.60948

Amount of Each Receipt this Period 200.00

CONTRIBUTION

C. MR TERRY O BRISTOL
Full Name (Last, First, Middle Initial)

Mailing Address 344 E FOOTHILLS PKWY
RED ROOM 9-W

City FORT COLLINS State CO Zip Code 80525

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

Name of Employer 344E FOOTHILLS PARKWAY FC COLORADO Occupation ASSET MGR

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 05 / 2012
Transaction ID : SA11AI.61001

Amount of Each Receipt this Period 45.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 345.00

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

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60963

0014063-0000060

Form/Schedule: SA11AI

Transaction ID: SA11AI.60948

0025974-0000044

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.61001

0024811-0000097

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 15 OF 76
(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

Full Name (Last, First, Middle Initial)
A. MR DEL C BROOKS

Mailing Address 12789 MUIRFIELD BLVD N

City JACKSONVILLE State FL Zip Code 32225

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

Name of Employer SMURFIT STORE CONT. CORP Occupation GEN MGR

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2012
Transaction ID : SA11AI.60927

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

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

Mailing Address 2800 S SHIRLINGTON ROAD

City ARLINGTON State VA Zip Code 22206

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012
Transaction ID : SA11AI.61083

Amount of Each Receipt this Period
 5000.00

Reattribute: EXCESS TO NON FEDERAL ACCT

Full Name (Last, First, Middle Initial)
C. MR DAVID COCKE

Mailing Address 28 CUTTER GREEN DR

City SAN ANTONIO State TX Zip Code 78248

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

Name of Employer NUPAK MEDICAL- LTD. Occupation GENERAL MANAGER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : SA11AI.60994

Amount of Each Receipt this Period
 25.04

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5075.04

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

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60927

0012784-0000022

Form/Schedule: SA11AI

Transaction ID: SA11AI.60994

0110315-0000089

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

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

FOR LINE NUMBER: PAGE 17 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR LEONARD A DEO
 Full Name (Last, First, Middle Initial)
 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: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2012
Transaction ID : SA11AI.60910
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. MR CRAIG W EGLOFF
 Full Name (Last, First, Middle Initial)
 Mailing Address 27001 HIGHWAY 128
 City YORKVILLE State CA Zip Code 95494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JAYMES & JAYMES Occupation INSURANCE BROKER
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : SA11AI.61035
 Amount of Each Receipt this Period
 60.00
 CONTRIBUTION

C. MR ALLAN EMERY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2535 KARAMY CT
 City COLORADO SPRINGS State CO Zip Code 80919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NA Occupation RETIRED
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : SA11AI.61003
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
TOTAL This Period (last page this line number only)..... ▶

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60910

0001536-0000004

Form/Schedule: SA11AI

Transaction ID: SA11AI.61035

0101847-0000129

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.61003

0108277-0000100

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 20 OF 76
(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. JAMES ENGLUND
 Full Name (Last, First, Middle Initial)
 Mailing Address 6004 WOODGLEN COURT
 City MOBILE State AL Zip Code 36609
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation ENGINEER
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2012
Transaction ID : SA11AI.60933
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. RENOLD I FAULK
 Full Name (Last, First, Middle Initial)
 Mailing Address 213 FERN HOLW
 City YOUNGSVILLE State LA Zip Code 70592
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2012
Transaction ID : SA11AI.60975
 Amount of Each Receipt this Period
 15.00
 CONTRIBUTION

C. MRS NITA FLANAGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 5445-J LAKE MARGARET DR
 City ORLANDO State FL Zip Code 32812
 FEC ID number of contributing federal political committee. C
 Name of Employer WYCLIFFE BIBLE TRANSLATORS Occupation SOFTWARE DEVELOPER
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2012
Transaction ID : SA11AI.60929
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 540.00
TOTAL This Period (last page this line number only)..... ▶

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60933

0110320-0000028

Form/Schedule: SA11AI

Transaction ID: SA11AI.60975

0104246-0000071

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60929

0099050-0000024

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 76
	<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. MRS PHYLLIS L GUNTER
Full Name (Last, First, Middle Initial)

Mailing Address 12939 JULINGTON RIDGE DR E

City JACKSONVILLE State FL Zip Code 32258

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 15 / 2012
Transaction ID : SA11AI.60928

Amount of Each Receipt this Period 30.00

CONTRIBUTION

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

Mailing Address 233 STATON RD

City CABOT State AR Zip Code 72023

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

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

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 05 / 2012
Transaction ID : SA11AI.60979

Amount of Each Receipt this Period 50.00

CONTRIBUTION

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

Mailing Address 2201 N SANGRE RD

City STILLWATER State OK Zip Code 74075

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 17 / 2012
Transaction ID : SA11AI.60981

Amount of Each Receipt this Period 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 180.00

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

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60928

0107460-0000023

Form/Schedule: SA11AI

Transaction ID: SA11AI.60979

0022519-0000075

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60981

0106295-0000077

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 26 OF 76
(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

Full Name (Last, First, Middle Initial)
A. MS M SANDRA HEA

Mailing Address 5924 CHILDRESS AVE

City SAINT LOUIS State MO Zip Code 63109

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

Name of Employer SELF EMPLOYED Occupation REALTOR

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2012
Transaction ID : SA11AI.60964

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR JAMES W HEATH

Mailing Address PO BOX 578

City CASCADE State ID Zip Code 83611

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

Name of Employer CASCADE SCHOOLS Occupation EDUCATOR

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2012
Transaction ID : SA11AI.61004

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR MICHAEL A HODGE

Mailing Address 610 PORTLAND LN

City GALT State CA Zip Code 95632

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

Name of Employer SELF-EMPLOYED Occupation CONSULTANT

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : SA11AI.61036

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60964

0106366-0000061

Form/Schedule: SA11AI

Transaction ID: SA11AI.61004

0102348-0000101

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.61036

0010944-0000130

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR CLAYTON L HOWIE
Full Name (Last, First, Middle Initial)

Mailing Address 1673 POPLAR LN

City CAMANO ISLAND State WA Zip Code 98282

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

Name of Employer THE SEATTLE TIMES CO. Occupation ASSISTANT DISTRICT ADVISOR

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
10 / 08 / 2012
Transaction ID : SA11AI.61042

Amount of Each Receipt this Period
25.00

CONTRIBUTION

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

Mailing Address 5010 LA BARRANCA ST

City SAN ANTONIO State TX Zip Code 78233

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

Name of Employer SELF Occupation MORTGAGE LOAN OFFICER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
10 / 05 / 2012
Transaction ID : SA11AI.60993

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. DR JOHN D KEISLING
Full Name (Last, First, Middle Initial)

Mailing Address 35 ERICA LN

City BELEN State NM Zip Code 87002

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

Name of Employer SAIC Occupation SCIENTIST

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1425.00

Date of Receipt
10 / 15 / 2012
Transaction ID : SA11AI.61007

Amount of Each Receipt this Period
40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.61042

0100387-0000136

Form/Schedule: SA11AI

Transaction ID: SA11AI.60993

0104518-0000088

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.61007

0100128-0000104

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 32 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR HENDRICK KERKSTRA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1711 TOURS COURT
 City BAKERSFIELD State CA Zip Code 93311
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : SA11AI.61030
 Amount of Each Receipt this Period
 60.00
 CONTRIBUTION

B. MR MELVIN C KERN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7005 KANSAS ST
 City VANCOUVER State WA Zip Code 98664
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED PUBLIC SCHOOL TEACHER
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012
Transaction ID : SA11AI.61045
 Amount of Each Receipt this Period
 120.00
 CONTRIBUTION

C. MRS CAROLYN C KINDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4212 KEEPSAKE CT
 City MODESTO State CA Zip Code 95356
 FEC ID number of contributing federal political committee. C
 Name of Employer SATELLITE HEALTH CARE Occupation RENAL DIETITIAJN
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : SA11AI.61034
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 230.00
TOTAL This Period (last page this line number only).....▶

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.61030

0108310-0000125

Form/Schedule: SA11AI

Transaction ID: SA11AI.61045

0083507-0000139

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.61034

0013787-0000128

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 35 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR WILLIAM LEE KING
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 192
 City MOUNT TABOR State NJ Zip Code 07878
 FEC ID number of contributing federal political committee. C
 Name of Employer RIKER PANZIG ET AL Occupation COPY FAX ROOM
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 08 / 2012
Transaction ID : SA11AI.60911
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

B. RICHARD LEBLEU
 Full Name (Last, First, Middle Initial)
 Mailing Address 7458 EASTLAKE RD
 City STERLINGTON State LA Zip Code 71280
 FEC ID number of contributing federal political committee. C
 Name of Employer DIXIE PULP & PAPER- INC. Occupation SALESMAN
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 03 / 2012
Transaction ID : SA11AI.60978
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

C. GARY W LOCKE JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 2602 BOOGER HILL RD
 City DANIELSVILLE State GA Zip Code 30633
 FEC ID number of contributing federal political committee. C
 Name of Employer USN/STATE OF GA Occupation RETIRED
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 15 / 2012
Transaction ID : SA11AI.60926
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.60911

0052656-0000005

Form/Schedule: SA11AI

Transaction ID: SA11AI.60978

0106147-0000073

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60926

0102864-0000021

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR W L MARKS
Full Name (Last, First, Middle Initial)

Mailing Address 6149 ST CHARLES AVENUE

City NEW ORLEANS State LA Zip Code 70118

FEC ID number of contributing federal political committee. C

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

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 11 / 2012
Transaction ID : SA11AI.60974

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. MAE L MCKINLEY
Full Name (Last, First, Middle Initial)

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 Occupation
RETIRED RETIRED

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012
Transaction ID : SA11AI.60959

Amount of Each Receipt this Period
50.00

CONTRIBUTION

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

Mailing Address 421 E GREENWOOD ST

City MORTON State IL Zip Code 61550

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
IL JUDGE

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 09 / 2012
Transaction ID : SA11AI.60962

Amount of Each Receipt this Period
600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1650.00
TOTAL This Period (last page this line number only).....▶	

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60974

0110537-0000069

Form/Schedule: SA11AI

Transaction ID: SA11AI.60959

0101794-0000056

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60962

0103251-0000058

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR RAYMOND L SALZMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 11151 RAWHIDE RD
 City LUSBY State MD Zip Code 20657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 16 / 2012
Transaction ID : SA11AI.60915
 Amount of Each Receipt this Period 70.00
 CONTRIBUTION

B. MR GARY J SELF
 Full Name (Last, First, Middle Initial)
 Mailing Address 8508 YORKSHIRE DR
 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: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 05 / 2012
Transaction ID : SA11AI.60992
 Amount of Each Receipt this Period 20.00
 CONTRIBUTION

C. MR WARREN SIMANDLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2322 VISTA MADERA
 City SANTA BARBARA State CA Zip Code 93101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SANTA BARBARA HIGH SCHOOL DIST Occupation PUBLIC SCHOOL TEACHER
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2012
Transaction ID : SA11AI.61028
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	115.00
TOTAL This Period (last page this line number only).....▶	

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60915

0097659-0000009

Form/Schedule: SA11AI

Transaction ID: SA11AI.60992

0013298-0000087

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.61028

0009367-0000123

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

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

Mailing Address 115 TALL TIMBER CT

City FAYETTEVILLE State GA Zip Code 30215

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

Name of Employer US AIR FORCE Occupation WEATHER OFFICER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 05 / 2012
Transaction ID : SA11AI.60925

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. MR STEPHEN SLIFKO JR
Full Name (Last, First, Middle Initial)

Mailing Address 9143 COAL BANK RD

City MARSHALLVILLE State OH Zip Code 44645

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

Name of Employer SELF EMPLOYED Occupation BUILDER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2012
Transaction ID : SA11AI.60133

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

[MEMO ITEM]

C. MR STEPHEN SLIFKO JR
Full Name (Last, First, Middle Initial)

Mailing Address 9143 COAL BANK RD

City MARSHALLVILLE State OH Zip Code 44645

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

Name of Employer SELF EMPLOYED Occupation BUILDER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 03 / 2012
Transaction ID : SA11AI.61082

Amount of Each Receipt this Period
-5000.00

Reattribute: CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ -4950.00

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

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60925

0014942-0000020

Form/Schedule: SA11AI

Transaction ID: SA11AI.60133

0054097-0000412 EXCESS CONTRIBUTION REDESIGNATED TO NON-FEDERAL ACCOUNT - TRANSFER TO SHOW ON PRE-GENERAL REPORT.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.61082

0054097-0000412 EXCESS CONTRIBUTION REDESIGNATED TO NON-FEDERAL ACCOUNT - TRANSFER TO
SHOW ON PRE-GENERAL REPORT.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 47 OF 76
(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. MRS DEBORAH E SMITH
 Full Name (Last, First, Middle Initial)
 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: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2012
Transaction ID : SA11AI.60924
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. MRS LINDA C SMITH
 Full Name (Last, First, Middle Initial)
 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: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2012
Transaction ID : SA11AI.60945
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. DR WILLIAM H SMITH
 Full Name (Last, First, Middle Initial)
 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: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2012
Transaction ID : SA11AI.61037
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
TOTAL This Period (last page this line number only)..... ▶

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60924

0027760-0000019

Form/Schedule: SA11AI

Transaction ID: SA11AI.60945

0038656-0000041

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.61037

0103927-0000131

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 76
	<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. LAKE C SPEED
Full Name (Last, First, Middle Initial)
Mailing Address 4025 OLD SALISBURY CONCORD RD
City KANNAPOLIS State NC Zip Code 28083
FEC ID number of contributing federal political committee. C
Name of Employer SELF Occupation REAL ESTATE / WAREHOUSING
Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 11 / 2012
Transaction ID : SA11AI.60920
Amount of Each Receipt this Period 25.00
CONTRIBUTION

B. MRS TAMMY E STEINBERG
Full Name (Last, First, Middle Initial)
Mailing Address 101 WINDINGHAM DR NW
City HUNTSVILLE State AL Zip Code 35806
FEC ID number of contributing federal political committee. C
Name of Employer HARRO APOTHERAPY Occupation HOMEMAKER
Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 05 / 2012
Transaction ID : SA11AI.60931
Amount of Each Receipt this Period 20.00
CONTRIBUTION

C. MR W S STIMPSON
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1663
City MOBILE State AL Zip Code 36633
FEC ID number of contributing federal political committee. C
Name of Employer GULF LUMBER CO Occupation CFO
Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 04 / 2012
Transaction ID : SA11AI.60934
Amount of Each Receipt this Period 1500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 1545.00
TOTAL This Period (last page this line number only)..... ►

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60920

0027438-0000015

Form/Schedule: SA11AI

Transaction ID: SA11AI.60931

0011951-0000026

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.60934

0103259-0000030

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

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

Mailing Address 32797 820TH ST

City BREWSTER State MN Zip Code 56119

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2012
Transaction ID : SA11AI.60957

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

Mailing Address 24902 N POINT PL

City KATY State TX Zip Code 77494

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

Name of Employer AVIARA ENERGY CORPORATION Occupation ENGINEER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2012
Transaction ID : SA11AI.60991

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

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

Mailing Address 60202 DAVIE

City CHAPEL HILL State NC Zip Code 27517

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2012
Transaction ID : SA11AI.60918

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1075.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.60957

0006116-0000054

Form/Schedule: SA11AI

Transaction ID: SA11AI.60991

0048257-0000086

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60918

0110544-0000012

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 76
	<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. MRS KATHLEEN WELD
Full Name (Last, First, Middle Initial)

Mailing Address 29 MAIN ST

City DOVER State MA Zip Code 02030

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

Name of Employer SELF Occupation PIANO TEACHER- HOMEMAKER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : SA11AI.60908

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

B. MRS LOIS WIERENGA
Full Name (Last, First, Middle Initial)

Mailing Address 3442 OLDERIDGE DR NE

City GRAND RAPIDS State MI Zip Code 49525

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

Name of Employer GRAND RAPIDS PUBLIC SCHOOLS Occupation TEACHER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2012
Transaction ID : SA11AI.60950

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

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

Mailing Address 2104 BENTHAM WAY

City YUKON State OK Zip Code 73099

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

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

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : SA11AI.60980

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2575.00
TOTAL This Period (last page this line number only).....▶	

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60908

0108754-0000001

Form/Schedule: SA11AI

Transaction ID: SA11AI.60950

0005517-0000047

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.60980

0007481-0000076

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 OF 76
(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. MS JANICE E WOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3946 HOLLADAY PARK LOOP SE
 City LACEY State WA Zip Code 98503
 FEC ID number of contributing federal political committee. C
 Name of Employer N/A Occupation RETIRED TEACHER
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2012
Transaction ID : SA11AI.61044
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

B. MRS JUNE L ZEIGLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 739 E 2ND NORTH ST #363
 City MORRISTOWN State TN Zip Code 37814
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : SA11AI.60935
 Amount of Each Receipt this Period
 30.00
 CONTRIBUTION

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

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

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	9970.04

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.61044

0101762-0000138

Form/Schedule: SA11AI

Transaction ID: SA11AI.60935

0098488-0000032

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 981540

City El Paso State TX Zip Code 79998

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2012

Transaction ID : SB21B.61046

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 981540

City El Paso State TX Zip Code 79998

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2012

Transaction ID : SB21B.61048

Amount of Each Disbursement this Period

0.96

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address 808 East Utah Valley Drive

City American Fork State UT Zip Code 84003

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2012

Transaction ID : SB21B.61047

Amount of Each Disbursement this Period

84.73

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

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

93.64

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. BB& T Bank

Mailing Address 2700 S. Quincy Street

City Arlington State VA Zip Code 22206

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : SB21B.61052

Amount of Each Disbursement this Period

39.66

Full Name (Last, First, Middle Initial)

B. BB& T Bank

Mailing Address 2700 S. Quincy Street

City Arlington State VA Zip Code 22206

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2012

Transaction ID : SB21B.61049

Amount of Each Disbursement this Period

2503.86

Full Name (Last, First, Middle Initial)

C. CASTLE STRATEGIES

Mailing Address P.O. Box 3284

City Fairfax State VA Zip Code 22038

Purpose of Disbursement
SOCIAL MEDIA CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : SB21B.61053

Amount of Each Disbursement this Period

2500.00

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

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

5043.52

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. DEER PARK

Mailing Address P.O. BOX 52271

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
OFFICE EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2012

Transaction ID : SB21B.61070

Amount of Each Disbursement this Period

26.49

Full Name (Last, First, Middle Initial)

B. FEDERAL EXPRESS

Mailing Address P.O. BOX 1140

City MEMPHIS State TN Zip Code 38101

Purpose of Disbursement
SHIPPING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : SB21B.61056

Amount of Each Disbursement this Period

22.41

Full Name (Last, First, Middle Initial)

C. FEDERAL EXPRESS

Mailing Address P.O. BOX 1140

City MEMPHIS State TN Zip Code 38101

Purpose of Disbursement
SHIPPING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2012

Transaction ID : SB21B.61058

Amount of Each Disbursement this Period

18.40

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

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

67.30

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. HELLER INFORMATION SERVICES

Mailing Address 12450 Parklawn Drive

City Rockville State MD Zip Code 20852

Purpose of Disbursement
COMPUTER SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2012

Transaction ID : SB21B.61059

Amount of Each Disbursement this Period

211.50

Full Name (Last, First, Middle Initial)

B. IRON MOUNTAIN

Mailing Address 745 ATLANTIC AVE

City BOSTON State MA Zip Code 02111

Purpose of Disbursement
STORAGE FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2012

Transaction ID : SB21B.61060

Amount of Each Disbursement this Period

303.63

Full Name (Last, First, Middle Initial)

C. LEXIS NEXIS

Mailing Address P.O. BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement
DUES & SUBSCRIPTIONS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2012

Transaction ID : SB21B.61065

Amount of Each Disbursement this Period

350.00

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

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

865.13

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. LPS

Mailing Address P.O. BOX 2325

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
PAC DATA PROCESSING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 04 / 2012

Transaction ID : SB21B.61061

Amount of Each Disbursement this Period

411.64

Full Name (Last, First, Middle Initial)

B. LPS

Mailing Address P.O. BOX 2325

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
PAC DATA PROCESSING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 04 / 2012

Transaction ID : SB21B.61063

Amount of Each Disbursement this Period

301.93

Full Name (Last, First, Middle Initial)

C. LPS

Mailing Address P.O. BOX 2325

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
PAC DATA PROCESSING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 16 / 2012

Transaction ID : SB21B.61064

Amount of Each Disbursement this Period

164.76

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

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

878.33

**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

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

Full Name (Last, First, Middle Initial)

A. OFFICE SHREDDERS

Mailing Address 6500 KANE WAY

City ELKRIDGE State MD Zip Code 21075

Purpose of Disbursement
OFFICE EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2012

Transaction ID : SB21B.61066

Amount of Each Disbursement this Period

95.00

Full Name (Last, First, Middle Initial)

B. PR NEWSWIRE

Mailing Address 810 7TH AVE 32ND FL

City NEW YORK State NY Zip Code 10019

Purpose of Disbursement
MEDIA RELEASES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : SB21B.61057

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

C. PR NEWSWIRE

Mailing Address 810 7TH AVE 32ND FL

City NEW YORK State NY Zip Code 10019

Purpose of Disbursement
MEDIA RELEASES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2012

Transaction ID : SB21B.61071

Amount of Each Disbursement this Period

465.00

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

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

965.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. SPRINT

Mailing Address P.O. BOX 530503

City ATLANTA State GA Zip Code 30353

Purpose of Disbursement TELEPHONE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2012

Transaction ID : **SB21B.61067**

Amount of Each Disbursement this Period: 15.40

Category/Type

Full Name (Last, First, Middle Initial)

B. VERIZON

Mailing Address P.O. BOX 17577

City BALTIMORE State MD Zip Code 21297

Purpose of Disbursement TELEPHONE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2012

Transaction ID : **SB21B.61068**

Amount of Each Disbursement this Period: 406.57

Category/Type

Full Name (Last, First, Middle Initial)

C. DEAN VIRAG

Mailing Address 14511 RILLHURST DR

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement WEBSITE SUPPORT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 04 / 2012

Transaction ID : **SB21B.61055**

Amount of Each Disbursement this Period: 500.00

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 921.97

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
PAC CAGING AND DATA ENTRY SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2012			

Transaction ID : SB21B.61073

Amount of Each Disbursement this Period

707.66

Full Name (Last, First, Middle Initial)

B. WEBSTER CHAMBERLAIN & BEAN

Mailing Address 1747 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2012			

Transaction ID : SB21B.61069

Amount of Each Disbursement this Period

109.50

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

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

817.16

9652.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)
A. TODD AKIN FOR SENATE

Mailing Address PO BOX 31222

City ST LOUIS State MO Zip Code 63131

Purpose of Disbursement CONTRIBUTION

Candidate Name **TODD AKIN FOR CONGRESS**

Office Sought: House Senate President
 Disbursement For: 2012 Primary General Other (specify) ▼
 State: MO District: 02

Date of Disbursement: 10 / 03 / 2012

Transaction ID : **SB23.61050**

Amount of Each Disbursement this Period: 2500.00

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

Amount of Each Disbursement this Period

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2500.00

TOTAL This Period (last page this line number only)..... ▶ 2500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. CAMPAIGN FOR WORKING FAMILIES

Mailing Address 2800 Shirlington Road, Suite 930

City Arlington State VA Zip Code 22206

Purpose of Disbursement
Transfer to non-federal account excess Slifko

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2012

Transaction ID : **SB29.61088**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

5000.00

5000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 71 OF 76
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

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

Outstanding Balance Beginning This Period 2955.31	Transaction ID : SD10.59010	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2955.31

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

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

Outstanding Balance Beginning This Period 878.33	Transaction ID : SD10.60903	
Amount Incurred This Period 0.00	Payment This Period 878.33	Outstanding Balance at Close of This Period 0.00

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 72 OF 76
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

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

Outstanding Balance Beginning This Period <input type="text" value="2320.90"/>	Transaction ID : SD10.4696	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2320.90"/>

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

Outstanding Balance Beginning This Period <input type="text" value="707.66"/>	Transaction ID : SD10.60904	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="707.66"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="2320.90"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="5499.32"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="5499.32"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CAMPAIGN FOR WORKING FAMILIES	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00325076 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee DESIGN 4 INC.		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 17 / 2012 </div>
Mailing Address 106 N. Collins Street		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 2825.00 </div>
City State Zip Code Plant City FL 33563	Transaction ID : SE.59683	
Purpose of Expenditure PAC Media Ad Production	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> 004 </div>	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 124037.17 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee In Altum Productions		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 04 / 2012 </div>
Mailing Address 7621 Provincial Dr.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 394.99 </div>
City State Zip Code McLean VA 22102	Transaction ID : SE.59673	
Purpose of Expenditure Web Ad	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> 004 </div>	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 5569.99 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 3219.99 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

Dorie Velez
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y Y Y
10 / 25 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CAMPAIGN FOR WORKING FAMILIES	FEC IDENTIFICATION NUMBER ▼ C C00325076
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee In Altum Productions		Date M M M / D D D / Y Y Y Y Y Y 10 / 09 / 2012
Mailing Address 7621 Provincial Dr.		Amount 1285.00
City McLean	State VA	
Zip Code 22102	Transaction ID : SE.59676	
Purpose of Expenditure Web Ad	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: <u>DC</u> <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 6854.99		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee In Altum Productions		Date M M M / D D D / Y Y Y Y Y Y 10 / 17 / 2012
Mailing Address 7621 Provincial Dr.		Amount 325.00
City McLean	State VA	
Zip Code 22102	Transaction ID : SE.59684	
Purpose of Expenditure PAC - Web Ad	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: <u>DC</u> <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 7179.99		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1610.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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

Dorie Velezis

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES
FEC IDENTIFICATION NUMBER
C C00325076
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name (Last, First, Middle Initial) of Payee
In Altum Productions
Mailing Address 7621 Provincial Dr.
City McLean State VA Zip Code 22102
Amount 953.50
Transaction ID : SE.61084
Purpose of Expenditure PAC AD PRODUCTION Category/Type 004
Office Sought: Senate
Check One: Support
Name of Federal Candidate Supported or Opposed by Expenditure:
JOSH MANDEL
Calendar Year-To-Date Per Election for Office Sought 118163.45
Disbursement For: General

Full Name (Last, First, Middle Initial) of Payee
NEW PARADIGM MEDIA
Mailing Address 9668 SILVERBERRY CIRCLE
City HIGHLANDS RANCH State CO Zip Code 80129
Amount 117209.95
Transaction ID : SE.59679
Purpose of Expenditure PAC Media Buy 10/17-10/24/12 Category/Type 004
Office Sought: Senate
Check One: Support
Name of Federal Candidate Supported or Opposed by Expenditure:
JOSH MANDEL
Calendar Year-To-Date Per Election for Office Sought 117209.95
Disbursement For: General

(a) SUBTOTAL of Itemized Independent Expenditures..... 118163.45
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Dorie Velezis [Electronically Filed] Date 10/25/2012
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CAMPAIGN FOR WORKING FAMILIES	FEC IDENTIFICATION NUMBER ▼ C C00325076
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee NEW PARADIGM MEDIA		Date M M M / D D D / Y Y Y Y Y Y 10 / 17 / 2012
Mailing Address 9668 SILVERBERRY CIRCLE		Amount 121212.17
City HIGHLANDS RANCH	State CO	
Zip Code 80129	Transaction ID : SE.59681	
Purpose of Expenditure PAC Media Buy 10/17-10/23/12	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 121212.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		M M M / D D D / Y Y Y Y Y Y
City		Amount
State	M M M / D D D / Y Y Y Y Y Y	
Zip Code	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President	
Purpose of Expenditure		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Category/ Type		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate Supported or Opposed by Expenditure:		
Calendar Year-To-Date Per Election for Office Sought		

(a) SUBTOTAL of Itemized Independent Expenditures.....	121212.17
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	244205.61

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

Dorie Velezis

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012

Signature