PAGE 1 / 10

# **FEC** FORM 3X

# **REPORT OF RECEIPTS** AND DISBURSEMENTS

	or Other Than An Aut	horized Committee	Office Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Committee for Working	g Families, sponsore	d by the California La	bor Federation, AFL-CIO
ADDRESS (number and street)	555 Capitol Mall, Suite 400		
▼ Check if different			
than previously reported. (ACC)	Sacramento		CA 95814 –
2. FEC IDENTIFICATION NU	JMBER ▼ CI	ГҮ▲	STATE ▲ ZIP CODE ▲
C C00626119		S THIS NEW (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20	(M6) Sep 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:			(Non-Election Year Only)
April 15 Quarterly Report (Q		20 (M4) Jul 20 (I	M7) Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q	(C) 12-Day	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Q	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (Y		on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	on on	in the State of
5. Covering Period 11	M / D D / Y Y Y Y Y Y 27 2018		2 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined th	is Report and to the best of	my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasure	Pulaski, Art, , ,		
Signature of Treasurer	iki, Art, , ,	[Electronically Filed]	Date 01 / 17 / 2018
NOTE: Submission of false, errone	eous, or incomplete informatio	n may subject the person sign	ning this Report to the penalties of 52 U.S.C. § 30109
Office			FEC FORM 3X
Use Only			Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

#### Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO

27 2018 12 31 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 402398.28 January 1. 2018 (b) Cash on Hand at 187067.99 Beginning of Reporting Period..... 574.05 3105517.90 Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 3507916.18 187642.04 6(a) and 6(c) for Column B)..... 22046.50 3342320.64 Total Disbursements (from Line 31)..... Cash on Hand at Close of 8. Reporting Period 165595.54 165595.54 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 750.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

# Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	0.00	70889.76
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add	0.00	70889.76
Lines 11(a)(i) and (ii)▶	0.00	70003.70
(b) Political Party Committees	0.00	0.00
(b) Political Party Committees	3.00	4
(such as PACs)	0.00	3033682.77
(d) Total Contributions (add Lines	4	7 7
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	0.00	3104572.53
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures	,	,
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made		
to Federal Candidates and Other Political Committees	0.00	0.00
Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	574.0F	945.37
Transfers from Non-Federal and Levin Funds	574.05	343.37
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(	4 4	4- 4- 4-
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Leviii i unus (iioiii oonedule iio)	4 4	4 4
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	4 4	4 4
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	574.05	3105517.90
Total Fadaval Passints		
. Total Federal Receipts	574.05	3105517.90
(subtract Line 18(c) from Line 19)▶	314.00	3103317.90

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:     (a) Allocated Federal/Non-Federal     Activity (from Schedule H4)	1 51154	Jaionaa Tear-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	2046.50	2179845.68
Expenditures(c) Total Operating Expenditures	2040.30	2173043.00
(add 21(a)(i), (a)(ii), and (b))	2046.50	2179845.68
Transfers to Affiliated/Other Party Committees Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	429000.00
Independent Expenditures (use Schedule E)	0.00	774935.23
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	114930.23
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	100000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	100000.00
Other Disbursements (Including Non-Federal Donations)	20000.00	- 141460.27
,	4 4	141400.27
Federal Election Activity (52 U.S.C. § 30101(2 (a) Allocated Federal Election Activity (from Schedule H6)	(0))	
(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
Total Dishurasments (add Live 24/2) 22		4 4
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	22046.50	3342320.64
Total Federal Disbursements	7 7	7 7 7
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	220.46.50	004000000
	22046.50	3342320.64

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

FEC FORM 3X (Rev. 05/2016)		Page 3
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)	0.00	3104572.53
34. Total Contribution Refunds (from Line 28(d))	0.00	100000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	3004572.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2046.50	2179845.68
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2046.50	2179845.68

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Comparison copied from such Reports and Statements may rout be sold or used by any person for the purpose of soliciting contributions from such Committee for Vorking Families, sponsored by the California Labor Federation, AFL-CIO   NAME OF COMMITTEE (in Full)	•		Use separate schedule(s) (chec		LINE NOMBER.	
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)  Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO  Full Name (Last, First, Middle Initial)  A Olson, Hagel & Fishburn LLP  Mailing Address 555 Capitol Mail, Suite 400  City  State  Carolidate Name  Carolidate Name  City  State  Distoursement  Distoursement  State:  Distoursement  Canodidate Name  City  State  Distoursement  Distoursement  Canodidate Name  City  State  Distoursement  Canodidate Name  City  State  Distoursement  Distoursement  Canodidate Name  City  State  Distoursement  Canodidate Name  City  State  Distoursement  Distoursement  Canodidate Name  City  State  Distoursement  Distoursement  Canodidate Name  City  State  Distoursement  Distoursement  Distoursement  Canodidate Name  City  State  Distoursement  Distoursement  Distoursement  Canodidate Name  City  State  Distoursement  Distoursement  Distoursement  Distoursement  Distoursement  Canodidate Name  City  State  Distoursement  Distoursemen	II LIVIIZED DISBURSEIVIEN IS		for each category of the			
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B.    Mailing Address		Other (spe	cify) ▼		Memo Item	
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Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:  Substrict: Memo Item  1646.50	•				FEC Identification Number	
Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  Substruct: Memo Item  Substruct: 1646.50	Purpose of Disbursement				C	
Office Sought: House Disbursement For: Senate Primary General President Other (specify)   State: District:  Substrict: Memo Item				L, , []		
Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District: Memo Item  1646.50	Candidate Name			Category/	Amount of Each Disbursement this Period	
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SCHEDULE B (FEC			FOR LINE NUMBER: PAGE 7 OF 10				
ITEMIZED DISBURS		Use separate schedule(s) (check o		nly one)			
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or for commercial purposes, o							
NAME OF COMMITTEE (Ir	Tull)						
Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO							
Full Name (Last, First, Mide	· · · · · · · · · · · · · · · · · · ·				Data of Dialous		
A. California Alliance	for Retired Ame	ericans			Date of Disburse		
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City		State	State Zip Code		FEC Identification	Number	
Oakland		CA	94610			T TURNSON	
Purpose of Disbursement Civic Donation				012			
Candidate Name						ID : EXPB509	
Canadato Hamo				Category/ Type	Amount of Each Disbursement this Period	Disbursement this Period	
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B. Progress California Su	Sporting Ricardo La	iia ioi iiisu	rance Commis				
Mailing Address 1127 11th	Street Suite 609				12 06 2018		
3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Caroot, Cano coo						
City		State	Zip Code		FEC Identification	Number	
Sacramento Purpose of Disbursement		CA	CA 95814				
Contribution to Non-Federal Committee				011	C		
Candidate Name				Category/		ID : EXPB510 Disbursement this Period	
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Mailing Address						_	
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Candidate Name				Category/	Amount of Each	Disbursement this Period	
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	nate sident	Primary Other (spe	General				
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SUBTOTAL of Disbursements	s This Page (optional)					20000.00	
						20002.22	
TOTAL This Period (last page	e this line number only	/)				20000.00	

# SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 8 OF 10

FOR LINE NUMBER: (check only one) 9

x 10

	ME OF COMMITTEE (In Full) ommittee for Working Families, spor	nsored by	the California Lab	or Federation, AFL-CIO
	A. Full Name (Last, First, Middle Initial) of Debtor of Clark, Betti, , ,  Mailing Address 2380 Moddison Avenue	Nature of Debt (Purpose): Travel Expenses		
	City	State	Zip Code	_
	Sacramento	CA	95819	
	Outstanding Balance Beginning This Period 50.00			Transaction ID : PAYD505
	Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
	0.00	0.00 50.00		
	B. Full Name (Last, First, Middle Initial) of Debtor o Dayoan, Alvin, , ,	Nature of Debt (Purpose): Travel Expenses		
	Mailing Address 1722 V Street, Apt. 5			
	City Sacramento	State	Zip Code 95818	
-	Outstanding Balance Beginning This Period 50.00  Amount Incurred This Period 0.00	Pay	ment This Period	Transaction ID : PAYD506  Outstanding Balance at Close of This Period  0.00
•	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  Dramer, Tamie, , ,			Nature of Debt (Purpose): Travel Expenses
	Mailing Address 2840 El Centro Road, #111			
	City Sacramento	State CA	Zip Code 95833	
	Outstanding Balance Beginning This Period 100.00			Transaction ID : PAYD501
	Amount Incurred This Period 0.00	Pay	ment This Period	Outstanding Balance at Close of This Period 0.00
1)	SUBTOTALS This Period This Page (optional)		<b>&gt;</b>	0.00
2)	TOTALS This Period (last page this line number of	nly)	<b>&gt;</b>	7 7 7
3)	TOTAL OUTSTANDING LOANS from Schedule C			
4)	ADD 2) and 3) and carry forward to appropriate lin	ne of Summa	ry Page (last page only) ▶	

### SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

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

PAGE OF FOR LINE NUMBER: (check only one)

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9

**X** 10 NAME OF COMMITTEE (In Full) Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Travel Expenses Graff, Evan, , , Mailing Address 621 Kentucky Street, #4 State Zip Code Vallejo CA 94590 Transaction ID: PAYD502 Outstanding Balance Beginning This Period 50.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 50.00 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Travel Expenses Malone, Belinda, , , Mailing Address P.O. Box 13951 City State Zip Code Sacramento 98853 CA Outstanding Balance Beginning This Period Transaction ID: PAYD504 50.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 50.00 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Travel Expenses Negrete, Liz, , , Mailing Address 434 K Street City State Zip Code Rio Linda CA 95678 Outstanding Balance Beginning This Period Transaction ID: PAYD503 50.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 50.00 0.00 0.00 1) SUBTOTALS This Period This Page (optional)..... 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 10 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

10

NAME OF COMMITTEE (In Full) Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Travel Expenses Sachen, Susan, , , Mailing Address 600 Grand Avenue, Suite 410 State Zip Code Oakland CA 94610 Transaction ID: PAYD542 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 750.00 0.00 750.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 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 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 750.00 1) SUBTOTALS This Period This Page (optional)..... 750.00 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... 750.00 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶