

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Campaign for Working Families

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

2. **FEC IDENTIFICATION NUMBER** C00325076
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 06 01 2006 through 06 30 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Amy Myers
Signature of Treasurer Electronically Filed by Amy Myers Date 07 31 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Campaign for Working Families

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		982491.24
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	1029648.31									
(c) Total Receipts (from Line 19)	73307.01	320712.77								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1102955.32	1303204.01								
7. Total Disbursements (from Line 31)	73817.58	274066.27								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1029137.74	1029137.74								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	3525.24									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Campaign for Working Families

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	45445.00	201259.50
(i) Itemized (use Schedule A)	27547.36	103046.20
(ii) Unitemized	72992.36	304305.70
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	72992.36	304305.70
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	975.80
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	314.65	15431.27
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	73307.01	320712.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	73307.01	320712.77

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	38817.58	215566.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	38817.58	215566.27
22. Transfers to Affiliated/Other Party Committees.....	0.00	5500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35000.00	53000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	73817.58	274066.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	73817.58	274066.27

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	72992.36	304305.70
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	72992.36	304305.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	38817.58	215566.27
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	975.80
38. Net Operating Expenditures (subtract Line 37 from Line 36)	38817.58	214590.47

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MS CINDY M BAUR

Mailing Address 2601 SW 14TH CT

City State Zip Code
DEERFIELD BCH FL 33442

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

Name of Employer Occupation
MECE PRESCHOOL KINDERGARTEN AIDE

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: SA11A1.65491

Amount of Each Receipt this Period
240.00

B. Full Name (Last, First, Middle Initial)
DR DUANE BERKOMPAS

Mailing Address 3889 BRECKINRIDGE DR

City State Zip Code
OKEMOS MI 48864

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

Name of Employer Occupation
THORACIC & CARDIOVASCULAR INST PHYSICIAN

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2006

Transaction ID: SA11A1.65634

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR DONALD C BISHOP

Mailing Address 15916 LA LINDURA DR

City State Zip Code
WHITTIER CA 90603

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2006

Transaction ID: SA11A1.65959

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	740.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
DR GARY R BISHOP

Mailing Address 15144 LARRY ST

City State Zip Code
POWAY CA 92064

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

Name of Employer Occupation
RIVERSIDE COUNTY PHARMACIST

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 05 / 2006

Transaction ID: SA11A1.65983

Amount of Each Receipt this Period
35.00

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

Mailing Address 10 SHALLOWBROOK DR

City State Zip Code
O FALLON IL 62269

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

Name of Employer Occupation
USAF US MILITARY

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 05 / 2006

Transaction ID: SA11A1.65766

Amount of Each Receipt this Period
50.00

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

Mailing Address 32265 WEEPING WILLOW ST

City State Zip Code
TRABUCO CYN CA 92679

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: SA11A1.66017

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	185.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MR LAWRENCE D BOONE

Mailing Address 4036 WILLIAMS RD

City State Zip Code
MODESTO CA 95358

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

Name of Employer Occupation
INFO REQUESTED INFO REQUESTED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: SA11A1.66073

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. RONALD A BOSS

Mailing Address 977 COACHWAY

City State Zip Code
ANNAPOLIS MD 21401

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2006

Transaction ID: SA11A1.65385

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR W L BRIGGS

Mailing Address 4150 N SUTTLE RD

City State Zip Code
PORTLAND OR 97217

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

Name of Employer Occupation
OIL REFINERY CO CEO - PRESIDENT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2006

Transaction ID: SA11A1.66108

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	400.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

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

Mailing Address 344 E FOOTHILLS PKWY
RED ROOM 9-W

City State Zip Code
FORT COLLINS CO 80525

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

Name of Employer Occupation
SELF ASSET MGR

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 05 / 2006

Transaction ID: SA11A1.65905

Amount of Each Receipt this Period
50.00

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

Mailing Address 12789 MUIRFIELD BLVD N

City State Zip Code
JACKSONVILLE FL 32225

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

Name of Employer Occupation
SMURFIT STORE CONT. CORP GEN MGR

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 05 / 2006

Transaction ID: SA11A1.65478

Amount of Each Receipt this Period
100.00

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

Mailing Address 42782 SUMMERHOUSE PL

City State Zip Code
BROADLANDS VA 20148

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

Name of Employer Occupation
KHA CIVIL ENGINEER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2006

Transaction ID: SA11A1.65378

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	650.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

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

Mailing Address 510 E SUNSHINE DR

City State Zip Code
SAN ANTONIO TX 78228

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

Name of Employer Occupation
INFO REQUESTED INFO REQUESTED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 05 / 2006

Transaction ID: SA11A1.65871

Amount of Each Receipt this Period
40.00

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

Mailing Address 1023 NE 98TH ST

City State Zip Code
SEATTLE WA 98115

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

Name of Employer Occupation
NORTHWEST HOSP C T TECHNOLOGIST

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 05 / 2006

Transaction ID: SA11A1.66138

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT CHAPDELAIN

Mailing Address 990 SWEET GRASS CIR

City State Zip Code
AURORA OH 44202

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

Name of Employer Occupation
PIONEER PRE-SCHOOL TEACHER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 05 / 2006

Transaction ID: SA11A1.65562

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional)	▶	2090.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MR E M WOODY CLARK

Mailing Address PO BOX 1306

City State Zip Code
PENDLETON OR 97801

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

Name of Employer Occupation
WOODPECKER TRUCK TRUCK SALES

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 12 / 2006

Transaction ID: SA11A1.66132

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS MARY ANNE COLE

Mailing Address 131 TENBURY RD

City State Zip Code
LUTHERVILLE MD 21093

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

Name of Employer Occupation
STUDENT STUDENT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2006

Transaction ID: SA11A1.65382

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
MRS KAY CREECH

Mailing Address PO BOX 29
2080 MIDDLE BURNT FORK RD

City State Zip Code
STEVENSVILLE MT 59870

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11A1.65731

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	5575.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial) RANDY GREECH		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006
Mailing Address PO BOX 29		Transaction ID: SA11A1.65732
City STEVENSVILLE	State MT	Zip Code 59870
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer SELF EMPLOYED	Occupation SELF EMPLOYED	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B. Full Name (Last, First, Middle Initial) MR LEONARD A DEO		Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2006
Mailing Address 2 SYLDEO DR		Transaction ID: SA11A1.65302
City PARSIPPANY	State NJ	Zip Code 07054
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer FLOWERS & GIFTS INC	Occupation FLORIST	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) MR FRANKLIN L DEREMER		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2006
Mailing Address 8 S CIRCLE DR		Transaction ID: SA11A1.66064
City SANTA CRUZ	State CA	Zip Code 95060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer ARC INTERNATIONAL	Occupation EXECUTIVE	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	5550.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MR DONALD R DOWNS

Mailing Address 333 W PASEO DE CRISTOBAL

City State Zip Code
SAN CLEMENTE CA 92672

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 19 / 2006

Transaction ID: SA11A1.66012

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR MICHAEL D ECHELBARGER

Mailing Address PO BOX 1

City State Zip Code
LYNNWOOD WA 98046

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

Name of Employer Occupation
ECHELBARGER INVESTMENTS REAL ESTATE DEVELOPEMENT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 15 / 2006

Transaction ID: SA11A1.66137

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR THOMAS C ENGLISH

Mailing Address 3367 LARKSPUR ST

City State Zip Code
COSTA MESA CA 92626

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

Name of Employer Occupation
DAFUM INC PHYSICIST

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 05 / 2006

Transaction ID: SA11A1.66004

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

Full Name (Last, First, Middle Initial) A. MR WAYNE ENGLUND		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6	
Mailing Address 7236 CLOVERLEAF LN		Transaction ID: SA11A1.65504	
City State Zip Code BESSEMER AL 35022	Amount of Each Receipt this Period 1200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED- NOT RECD	Occupation INFO REQUESTED- NOT RECD		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

Full Name (Last, First, Middle Initial) B. MRS ANNETTA ENSING		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6	
Mailing Address 1763 BRIDLE CREEK ST SE		Transaction ID: SA11A1.65648	
City State Zip Code KENTWOOD MI 49508	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. MR JERRY ERICKSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6	
Mailing Address PO BOX 3006		Transaction ID: SA11A1.66136	
City State Zip Code BOTHELL WA 98041	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer C E PUBLICATIONS	Occupation MANAGING EDITOR		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional) ▶	1700.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 51
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MR MAYNARD M EYESTONE

Mailing Address 19334 KINGS GARDEN DR N APT 112
APT 112

City Shoreline State WA Zip Code 98133

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.66140

Amount of Each Receipt this Period
 20.00

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

Mailing Address 358 PLANTATION DR

City Greenwood State SC Zip Code 29649

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

Name of Employer W J TURPISH & COMPANY Occupation REGIONAL SALES MANAGER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.65449

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
ANNE D FREEMAN

Mailing Address 6485 POPLAR AVENUE

City Memphis State TN Zip Code 38119

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.66234

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)	▶	770.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
DR JERRE M FREEMAN

Mailing Address 6485 POPLAR AVE

City MEMPHIS State TN Zip Code 38119

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

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.65534

Amount of Each Receipt this Period
 4500.00

B. Full Name (Last, First, Middle Initial)
MR FRANCIS L FRIEND

Mailing Address 2125 LUANN LN APT 6

City MADISON State WI Zip Code 53713

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

Name of Employer INTERVARSITY Occupation MANAGER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.65685

Amount of Each Receipt this Period
 50.00

C. Full Name (Last, First, Middle Initial)
MS JEAN GERSTNER

Mailing Address 351 E JOSEPH WAY

City GILBERT State AZ Zip Code 85296

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

Name of Employer SELF-EMPLOYED Occupation SELF EMPLOYED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.65947

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)	▶	4600.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MR DON W GILMOUR

Mailing Address 531 RIDGEWOOD RD

City State Zip Code
LOUISVILLE KY 40207

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

Name of Employer Occupation
REMAX REAL ESTATE SALES

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: SA11A1.65539

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR DENNIS A GOLDENMAN

Mailing Address 2016 18TH AVE

City State Zip Code
MONROE WI 53566

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

Name of Employer Occupation
THE SWISS COLONY INC ACCOUNTANT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: SA11A1.65683

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR BOBBI GOOD

Mailing Address 18161 BASTANCHURY RD

City State Zip Code
YORBA LINDA CA 92886

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

Name of Employer Occupation
ROSE DRIVE FRIENDS CHURCH RISK MANAGER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2006

Transaction ID: SA11A1.66033

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MR CARL W GUSTKE

Mailing Address 233 STATON RD

City State Zip Code
CABOT AR 72023

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

Name of Employer Occupation
FED EX PILOT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 05 / 2006

Transaction ID: SA11A1.65812

Amount of Each Receipt this Period
50.00

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

Mailing Address 645 WILLOW VALLEY SQ # J312

City State Zip Code
LANCASTER PA 17602

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2006

Transaction ID: SA11A1.65358

Amount of Each Receipt this Period
25.00

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

Mailing Address 345 W MEATS AVE

City State Zip Code
ORANGE CA 92865

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

Name of Employer Occupation
HAMILTON MATERIALS INC OWNER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: SA11A1.66028

Amount of Each Receipt this Period
1000.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

Full Name (Last, First, Middle Initial) A. MR DALE HEDRICK		Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2006	
Mailing Address 2200 CENTRE PARK WEST DR STE 100		Transaction ID: SA11A1.65490	
City WEST PALM BCH	State FL	Zip Code 33409	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer HEDRICK BROTHERS	Occupation GENERAL CONTROLTOR		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. MR THEODORE G HINES		Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2006	
Mailing Address 434 E WASHINGTON BLVD		Transaction ID: SA11A1.65342	
City GROVE CITY	State PA	Zip Code 16127	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer PINE INSTRUMENT CO	Occupation EXECUTIVE		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. MR ALAN HOKANSON		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2006	
Mailing Address 152 GRANDE VISTA WAY		Transaction ID: SA11A1.65505	
City CHELSEA	State AL	Zip Code 35043	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer BIOHORIZONS IMPLANT SYSTE-MS INC	Occupation VP OPERATIONS		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	1450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

Full Name (Last, First, Middle Initial) A. MR J CHARLES HOLLIMON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 504 E MANDALAY DR		Transaction ID: SA11A1.65868
City State Zip Code SAN ANTONIO TX 78212	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer SELF EMPLOYED	Occupation OWNER OIL & GAS	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. MRS LORENA JAEB		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address PO BOX 428		Transaction ID: SA11A1.65496
City State Zip Code MANGO FL 33550	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. KEITH KENDALL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 6549 WARREN SPUR RD		Transaction ID: SA11A1.65929
City State Zip Code MELBA ID 83641	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer KENDALL EMPLOYMENT PLUS	Occupation OWNER	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 51
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MR JOHN LEMMONS

Mailing Address 1973 ROSE VALLEY RD

City State Zip Code
KELSO WA 98626

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

Name of Employer Occupation
PACIFIC FIBRE PRODUCTS INC EXECUTIVE

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: SA11A1.66157

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS MARILYN MARKHAM

Mailing Address 350 HEIDI CT

City State Zip Code
MORGAN HILL CA 95037

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

Name of Employer Occupation
MORGAN HILL- PA. MUSIC TEACHER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 27 / 2006

Transaction ID: SA11A1.66063

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
DR ROY V MAXSON

Mailing Address 5785 E 500 S

City State Zip Code
WHITESTOWN IN 46075

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

Name of Employer Occupation
RETIRED RETIRED PHYSICIAN

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: SA11A1.65589

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)	▶	735.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

Full Name (Last, First, Middle Initial) A. MR CALVIN MEINDERS		Date of Receipt MM / DD / YYYY 06 / 19 / 2006
Mailing Address 1240 170TH ST		Transaction ID: SA11A1.65657
City PELLA	State IA	Zip Code 50219
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer VERMEER MANUFACTURING	Occupation ENGINEER	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. MR PHILIP A MERRITT		Date of Receipt MM / DD / YYYY 06 / 21 / 2006
Mailing Address 47 RAVENWOOD CIR		Transaction ID: SA11A1.65759
City BLOOMINGTON	State IL	Zip Code 61704
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Full Name (Last, First, Middle Initial) C. MR MELVYN MICHAELIAN		Date of Receipt MM / DD / YYYY 06 / 14 / 2006
Mailing Address 2078 RANCHO LAS PALMAS DR		Transaction ID: SA11A1.65980
City FALLBROOK	State CA	Zip Code 92028
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer FALLBROOK CA	Occupation PHYSICIAN	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

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

Mailing Address 2517 BRENTWOOD DR

City State Zip Code
ABILENE TX 79605

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 12 / 2006

Transaction ID: SA11A1.65892

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS RUTH MIRAGLIA

Mailing Address 1485 TURKEY TRL

City State Zip Code
INVERNESS IL 60067

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: SA11A1.65736

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR JAY J MOREY

Mailing Address 727 FOREST AVE

City State Zip Code
GLEN ELLYN IL 60137

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

Name of Employer the morey corp Occupation vp

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2006

Transaction ID: SA11A1.65739

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial) MR NOMIE M NAMIE, JR		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address PO BOX 458		Transaction ID: SA11A1.65737	
City State Zip Code ELBURN IL 60119		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) MR JOHN E NEWBY		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 1131 OVERTON CT		Transaction ID: SA11A1.65750	
City State Zip Code NAPERVILLE IL 60540		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation HEWLETT PACKARD PROGRAM MANAGER			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

C. Full Name (Last, First, Middle Initial) MRS VIOLA PANMAN		Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2006	
Mailing Address 1152 CALLE MARIA		Transaction ID: SA11A1.65984	
City State Zip Code SAN MARCOS CA 92069		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation HOMEMAKER HOMEMAKER			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MS MELINDA PARK

Mailing Address 2193 RIDGEPOINTE CT

City State Zip Code
WALNUT CREEK CA 94596

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

Name of Employer Occupation
ROAD INC SALES EXEC

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2006

Transaction ID: SA11A1.66058

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR JAMES S PHILLIPS

Mailing Address 1476 KELSO BLVD

City State Zip Code
WINDERMERE FL 34786

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

Name of Employer Occupation
CERTI-FINE FRUIT CO INC CITRUS GROWER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2006

Transaction ID: SA11A1.65502

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR ALLEN L PRICE

Mailing Address 1503 FLOYD DR

City State Zip Code
SAN ANGELO TX 76904

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

Name of Employer Occupation
SMITH- ROSE- ETAL ATTORNEY

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2006

Transaction ID: SA11A1.65849

Amount of Each Receipt this Period
1000.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

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

Mailing Address 2020 ROSE CREEK BLVD S

City State Zip Code
FARGO ND 58104

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

Name of Employer Occupation
FOOD SERV OF MANAGEMENT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 15 / 2006

Transaction ID: SA11A1.65718

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR GARNIER K PURYEAR

Mailing Address 2723 FAWNGROVE CT

City State Zip Code
COLORADO SPGS CO 80906

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

Name of Employer Occupation
SMITH BARNEY FINANCIAL CONSULTANT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 20 / 2006

Transaction ID: SA11A1.65914

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MS BEVERLY K RIESE

Mailing Address 2608 W 3RD ST

City State Zip Code
HASTINGS NE 68901

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

Name of Employer Occupation
SELF EMPLOYED BOOKKEEPER SELF-EMPLOYED BOOKKEEPER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 20 / 2006

Transaction ID: SA11A1.65800

Amount of Each Receipt this Period
50.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
ROBERT F SANFORD

Mailing Address 344 LAZY S RANCH RD

City State Zip Code
GUNTER TX 75058

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2006

Transaction ID: SA11A1.65830

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR DOUGLAS M SCHROEDER

Mailing Address 15720 52ND AVE N

City State Zip Code
MINNEAPOLIS MN 55446

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

Name of Employer Occupation
NORTHWESTERN CFO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: SA11A1.65703

Amount of Each Receipt this Period
50.00

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

Mailing Address 1118 S 3RD AVE E

City State Zip Code
ELY MN 55731

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

Name of Employer Occupation
SELF EMPLOYED DENTIST

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2006

Transaction ID: SA11A1.65705

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MR LOY T SCURLOCK

Mailing Address 9505 N 7100 RD E

City GRANT PARK State IL Zip Code 60940

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

Name of Employer INFO REQUESTED Occupation INFOR REQUESTED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.65755

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
MS HEIDI SHEARER

Mailing Address 1210 EVART ST

City MIDLAND State MI Zip Code 48642

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

Name of Employer SELF EMPLOYED Occupation PRIVATE FRANCHISING

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.65631

Amount of Each Receipt this Period
 100.00

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

Mailing Address 47 PRINCETON DR

City RANCHO MIRAGE State CA Zip Code 92270

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 0 / 2 0 0 6

Transaction ID: SA11A1.65990

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)	▶	450.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MRS LORRAINE SIMPSON

Mailing Address 4420 BEVERLY DR

City State Zip Code
DALLAS TX 75205

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

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

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 27 / 2006

Transaction ID: SA11A1.65833

Amount of Each Receipt this Period
800.00

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

Mailing Address 115 TALL TIMBER CT

City State Zip Code
FAYETTEVILLE GA 30215

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

Name of Employer Occupation
US AIR FORCE WEATHER OFFICER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 05 / 2006

Transaction ID: SA11A1.65463

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MRS DEBORAH E SMITH

Mailing Address 3360 E TERRELL BRANCH CT SE

City State Zip Code
MARIETTA GA 30067

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 05 / 2006

Transaction ID: SA11A1.65456

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)	▶	875.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MR GRAHAM START

Mailing Address 56 DIXON RD

City State Zip Code
MILPITAS CA 95035

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

Name of Employer Occupation
SELF EMPLOYED SALES

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2006

Transaction ID: SA11A1.66062

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS ESTHER R STEEGE

Mailing Address 4600 FOREST AVE SE

City State Zip Code
MERCER ISLAND WA 98040

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 12 / 2006

Transaction ID: SA11A1.66135

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MRS HELEN A STEFELY

Mailing Address 941 S EUCLID AVE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2006

Transaction ID: SA11A1.65738

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

Full Name (Last, First, Middle Initial) A. MS ELAINE STEITZ		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6	
Mailing Address 3418 HAYMAN DR		Transaction ID: SA11A1.65829	
City State Zip Code GARLAND TX 75043	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CAMPUS CRUSADE FOR CHRIST	Occupation MENTOR		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. MR WILLIAM C STEWART		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6	
Mailing Address 5114 KINGFISHER DR		Transaction ID: SA11A1.65852	
City State Zip Code HOUSTON TX 77035	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. DR JAMES P SYVRUD		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6	
Mailing Address 8225 BRUTON RD		Transaction ID: SA11A1.65834	
City State Zip Code DALLAS TX 75217	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer OWNER & LIBERTY HEALTHCARE	Occupation CHIROPRACTOR		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 51
	<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 CAROLE TOWNSEND		Date of Receipt M M / D D / Y Y Y Y 06 / 20 / 2006	
Mailing Address 30 LONE PINE WAY		Transaction ID: SA11A1.65923	
City State Zip Code COLORADO SPGS CO 80919	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) B. MR JOHN TRUELSON		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2006	
Mailing Address 3108 CARUTH BLVD		Transaction ID: SA11A1.65836	
City State Zip Code DALLAS TX 75225	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer SELF EMPLOYED	Occupation SELF EMPLOYED		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. MR KENTON H UNDERWOOD		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 106 HONEYSUCKLE DR		Transaction ID: SA11A1.65344	
City State Zip Code BOALSBURG PA 16827	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		

SUBTOTAL of Receipts This Page (optional) ▶	5350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 51
	<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 JOHN C WAGNER		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2006	
Mailing Address 710 FRUITVILLE PIKE		Transaction ID: SA11A1.65355	
City State Zip Code MANHEIM PA 17545	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer SELF EMPLOYED - WHITE OAK MILL	Occupation PORK PRODUCTION / FEED MANUFAC		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. MR MARK A WALKOTTEN		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2006	
Mailing Address 3755 ACORN RIDGE CT NE		Transaction ID: SA11A1.65652	
City State Zip Code GRAND RAPIDS MI 49525	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CROWE CHIZEK & CO	Occupation CPA		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. MRS CHERYL L WELLS		Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2006	
Mailing Address 366 16TH ST SE		Transaction ID: SA11A1.65666	
City State Zip Code LE MARS IA 51031	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED- NOT RECD	Occupation INFO REQUESTED- NOT RECD		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 / 51
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

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

Mailing Address 4007 NORWOOD ST

City State Zip Code
MIDLAND TX 79707

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

Name of Employer Occupation
BURLINGTON RESOURCES GEOLOGIST

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 23 / 2006

Transaction ID: SA11A1.65893

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR TODD WYLIE

Mailing Address 7510 S DEERVIEW LN

City State Zip Code
SPOKANE WA 99223

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

Name of Employer Occupation
D.TODD WYLIE- OD- INC OPTOMETRIC PHYSICIAN

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 19 / 2006

Transaction ID: SA11A1.66163

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	45445.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 35 / 51	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

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

Mailing Address 1800 K Street

City State Zip Code
Washington DC 20002

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15431.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	6

Transaction ID: SA17.66225

Amount of Each Receipt this Period
314.65

Interest Income

SUBTOTAL of Receipts This Page (optional)	▶	314.65
TOTAL This Period (last page this line number only)	▶	314.65

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

Full Name (Last, First, Middle Initial) A. AAMP		Transaction ID: SB21B.66170 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6
Mailing Address 9127 ANTIQUE WAY		Amount of Each Disbursement this Period 4206.62
City MANASSAS State VA Zip Code 20110	Purpose of Disbursement PAC - Direct Mail Production	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. ALLFIRST BANK		Transaction ID: SB21B.66171 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 6
Mailing Address 1800 K Street		Amount of Each Disbursement this Period 791.21
City Washington State DC Zip Code 20002	Purpose of Disbursement Bank Fees	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. ALLFIRST BANK		Transaction ID: SB21B.66224 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 1800 K Street		Amount of Each Disbursement this Period 13.97
City Washington State DC Zip Code 20002	Purpose of Disbursement Bank Fees	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5011.80
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. Gary Bauer		Transaction ID: SB21B.66216 Date of Disbursement 06 / 26 / 2006	
Mailing Address 2800 Shirlington Road		Amount of Each Disbursement this Period 7200.00	
City Arlington State VA Zip Code 22206	Purpose of Disbursement Consulting - Political	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. CAPITOL ADVANTAGE		Transaction ID: SB21B.66187 Date of Disbursement 06 / 09 / 2006	
Mailing Address P.O. 1223		Amount of Each Disbursement this Period 1500.00	
City McLean State VA Zip Code 22101	Purpose of Disbursement Computer Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. COVINGTON & BURLING		Transaction ID: SB21B.66188 Date of Disbursement 06 / 09 / 2006	
Mailing Address 1201 Pennsylvania Ave., NW		Amount of Each Disbursement this Period 357.50	
City Washington State DC Zip Code 20044	Purpose of Disbursement Legal Fees	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	9057.50
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. COVINGTON & BURLING		Transaction ID: SB21B.66213 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 1201 Pennsylvania Ave., NW		Amount of Each Disbursement this Period 715.00
City Washington State DC Zip Code 20044		
Purpose of Disbursement Legal Fees Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. DIRECTECH, INC		Transaction ID: SB21B.66232 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 8595 Grovemont Circle		Amount of Each Disbursement this Period 304.98
City Gaithersburg State MD Zip Code 20877		
Purpose of Disbursement General Office Postage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. DIRECTECH, INC		Transaction ID: SB21B.66230 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 6
Mailing Address 8595 Grovemont Circle		Amount of Each Disbursement this Period 82.68
City Gaithersburg State MD Zip Code 20877		
Purpose of Disbursement General office postage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1102.66
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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. DIRECTECH, INC		Transaction ID: SB21B.66169 Date of Disbursement MM / DD / YYYY 06 / 27 / 2006
Mailing Address 8595 Grovemont Circle		Amount of Each Disbursement this Period 1494.00
City Gaithersburg State MD Zip Code 20877	Category/ Type	
Purpose of Disbursement Caging and Data Processing		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. F&M BANK		Transaction ID: SB21B.66172 Date of Disbursement MM / DD / YYYY 06 / 15 / 2006
Mailing Address 4117 Chain Bridge Road		Amount of Each Disbursement this Period 624.72
City Fairfax State VA Zip Code 22030	Category/ Type	
Purpose of Disbursement Bank Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. INTEGRAM		Transaction ID: SB21B.66233 Date of Disbursement MM / DD / YYYY 06 / 27 / 2006
Mailing Address 8421 Hilltop Road		Amount of Each Disbursement this Period 5571.36
City Fairfax State VA Zip Code 22031	Category/ Type	
Purpose of Disbursement PAC - Direct Mail Production		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7690.08
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

Full Name (Last, First, Middle Initial) A. LEXIS NEXIS		Transaction ID: SB21B.66191 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address P.O. Box 7247-7090		Amount of Each Disbursement this Period 350.00	
City Philadelphia State PA Zip Code 19170	Purpose of Disbursement Dues & Subscriptions Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MGP Shirlington Gateway		Transaction ID: SB21B.66217 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6	
Mailing Address P.O. Box 201630		Amount of Each Disbursement this Period 2278.36	
City Dallas State TX Zip Code 75320	Purpose of Disbursement Rent Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Bill Moeller		Transaction ID: SB21B.66186 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 2800 Shirlington Road #930		Amount of Each Disbursement this Period 94.49	
City Arlington State VA Zip Code 22206	Purpose of Disbursement Travel Expense Reimbursement Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2722.85
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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. Bill Moeller		Transaction ID: SB21B.66212 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6	
Mailing Address 2800 Shirlington Road #930		Amount of Each Disbursement this Period 2150.00	
City Arlington State VA Zip Code 22206	Purpose of Disbursement Consulting - Political	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. NATIONAL JOURNAL		Transaction ID: SB21B.66192 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1501 M Street, NW		Amount of Each Disbursement this Period 1597.50	
City Washington State DC Zip Code 20005	Purpose of Disbursement Dues & Subscriptions	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. RECORDS MGMT INC		Transaction ID: SB21B.66211 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6	
Mailing Address 7726 Southern Drive		Amount of Each Disbursement this Period 160.80	
City Springfield State VA Zip Code 22150	Purpose of Disbursement Storage Fees	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3908.30
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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. Suntrust		Transaction ID: SB21B.66182 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6
Mailing Address P.O. Box 622227		Amount of Each Disbursement this Period 32.00
City Orlando State FL Zip Code 32862	Purpose of Disbursement Bank Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. THE LUKENS COMPANY'		Transaction ID: SB21B.66227 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6
Mailing Address 2800 Shirlington Road 9th Floor		Amount of Each Disbursement this Period 2000.00
City Arlington State VA Zip Code 22206	Purpose of Disbursement PAC - Direct Mail Consulting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. THE LUKENS COMPANY'		Transaction ID: SB21B.66228 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6
Mailing Address 2800 Shirlington Road 9th Floor		Amount of Each Disbursement this Period 2000.00
City Arlington State VA Zip Code 22206	Purpose of Disbursement PAC - Direct Mail Consulting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	4032.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

Full Name (Last, First, Middle Initial) A. Dorie Velezis		Transaction ID: SB21B.66215 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 2800 Shirlington Road #930		Amount of Each Disbursement this Period 2000.00
City Arlington State VA Zip Code 22206	Purpose of Disbursement Accounting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. VERIZON		Transaction ID: SB21B.66220 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address P.O. Box 17577		Amount of Each Disbursement this Period 403.32
City Baltimore State MD Zip Code 21297	Purpose of Disbursement Telephone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Dean Virag		Transaction ID: SB21B.66189 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 14039 Westwind Lane		Amount of Each Disbursement this Period 350.00
City Culpeper State VA Zip Code 22701	Purpose of Disbursement Computer Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	2753.32
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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. Dean Virag		Transaction ID: SB21B.66214 Date of Disbursement 06 / 26 / 2006	
Mailing Address 14039 Westwind Lane			
City Culpeper	State VA	Zip Code 22701	
Purpose of Disbursement Computer Services		Amount of Each Disbursement this Period 2100.00	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	▶	2100.00
TOTAL This Period (last page this line number only)	▶	38378.51

**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. FRIENDS OF MIKE SODREL		Transaction ID: SB23.66197 Date of Disbursement
Mailing Address 702 North Shore Drive Suite 500		<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>
City Jeffersonville	State IN	Zip Code 47130
Purpose of Disbursement Contribution	<input type="text"/>	
Candidate Name FRIENDS OF MIKE SODREL	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN	District: 09	
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) B. JIM JORDAN FOR CONGRESS		Transaction ID: SB23.66198 Date of Disbursement
Mailing Address 1709 STATE ROUTE 560 S		<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>
City URBANA	State OH	Zip Code 43078
Purpose of Disbursement Contribution	<input type="text"/>	
Candidate Name JIM JORDAN FOR CONGRESS	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 04	
		Amount of Each Disbursement this Period <input type="text" value="2500.00"/>

Full Name (Last, First, Middle Initial) C. MARK KENNEDY 06		Transaction ID: SB23.66200 Date of Disbursement
Mailing Address PO BOX 49333		<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>
City BLAINE	State MN	Zip Code 55449
Purpose of Disbursement Contribution	<input type="text"/>	
Candidate Name MARK KENNEDY 06	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District: 00	
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="12500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

Full Name (Last, First, Middle Initial) A. PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE		Transaction ID: SB23.66222
Mailing Address PO BOX 1131		Date of Disbursement MM / DD / YYYY 06 / 28 / 2006
City ANDERSON	State IN	Zip Code 46015
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. ROSKAM FOR CONGRESS COMMITTEE		Transaction ID: SB23.66202
Mailing Address 423 W. Wesley Street		Date of Disbursement MM / DD / YYYY 06 / 22 / 2006
City Wheaton	State IL	Zip Code 60189
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name ROSKAM FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 6	Category/ Type	

Full Name (Last, First, Middle Initial) C. SALI FOR CONGRESS		Transaction ID: SB23.66204
Mailing Address PO Box 71		Date of Disbursement MM / DD / YYYY 06 / 22 / 2006
City KUNA	State ID	Zip Code 83634
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name SALI FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ID District: 01	Category/ Type	

SUBTOTAL of Disbursements This Page (optional)	12500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

Full Name (Last, First, Middle Initial) A. SHARRON ANGLE YOUR VOICE IN CONGRESS		Transaction ID: SB23.66208
Mailing Address PO BOX 33058		Date of Disbursement MM / DD / YYYY 06 / 22 / 2006
City RENO	State NV	Zip Code 89533
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name SHARRON ANGLE YOUR VOICE IN CONGRESS	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV	District: 02	

Full Name (Last, First, Middle Initial) B. WALBERG FOR CONGRESS		Transaction ID: SB23.66209
Mailing Address 6769 Teachout Road		Date of Disbursement MM / DD / YYYY 06 / 22 / 2006
City Tipton	State MI	Zip Code 49287
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name WALBERG FOR CONGRESS	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District: 07	

SUBTOTAL of Disbursements This Page (optional) ►

10000.00

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

35000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AAMP	Nature of Debt (Purpose): PAC - Direct Mail Production
Mailing Address 9127 ANTIQUE WAY	
City State ZIP Code MANASSAS VA 20110	

Outstanding Balance Beginning This Period 4206.62	Transaction ID: SD10.65270	
Amount Incurred This Period 0.00	Payment This Period 4206.62	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor DIRECTECH, INC	Nature of Debt (Purpose): Caging & Data Processing
Mailing Address 8595 Grovemont Circle	
City State ZIP Code Gaithersburg MD 20877	

Outstanding Balance Beginning This Period 223.11	Transaction ID: SD10.42032	
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 DIRECTECH, INC	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 1494.00	Transaction ID: SD10.65269	
Amount Incurred This Period 0.00	Payment This Period 1494.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	223.11
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 49 / 51
	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 DIRECTECH, INC	Nature of Debt (Purpose): General Office Postage
Mailing Address 8595 Grovemont Circle	
City State ZIP Code Gaithersburg MD 20877	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.66231	
Amount Incurred This Period 304.98	Payment This Period 304.98	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor DIRECTECH, INC	Nature of Debt (Purpose): General office postage
Mailing Address 8595 Grovemont Circle	
City State ZIP Code Gaithersburg MD 20877	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.66229	
Amount Incurred This Period 82.68	Payment This Period 82.68	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor DIRECTECH, INC	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 0.00	Transaction ID: SD10.66168	
Amount Incurred This Period 1431.23	Payment This Period 0.00	Outstanding Balance at Close of This Period 1431.23

1) SUBTOTALS This Period This Page (optional).....	▶	1431.23
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS 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 50 / 51
	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): Direct Mail
Mailing Address 8048 Hillrise Court	
City State ZIP Code Elkridge MD 21075	

Outstanding Balance Beginning This Period 2320.90	Transaction ID: SD10.15344	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2320.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Seckman Printing	Nature of Debt (Purpose): Printing & Mailing
Mailing Address 305 Enterprise Drive	
City State ZIP Code Forest VA 24551	

Outstanding Balance Beginning This Period -450.00	Transaction ID: SD10.15354	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period -450.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LUKENS COMPANY'	Nature of Debt (Purpose): Direct Mail
Mailing Address 2800 Shirlington Road 9th Floor	
City State ZIP Code Arlington VA 22206	

Outstanding Balance Beginning This Period 1022.32	Transaction ID: SD10.15340	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1022.32

1) SUBTOTALS This Period This Page (optional).....	2893.22
2) TOTALS This Period (last page this line number only).....	
3) TOTALS 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 51 / 51
	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 THE LUKENS COMPANY'	Nature of Debt (Purpose): Credit for Error in Billi- ng
Mailing Address 2800 Shirlington Road 9th Floor	
City State ZIP Code Arlington VA 22206	

Outstanding Balance Beginning This Period -1022.32	Transaction ID: SD10.15509	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period -1022.32

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LUKENS COMPANY'	Nature of Debt (Purpose): PAC - Direct Mail Consult- ing
Mailing Address 2800 Shirlington Road 9th Floor	
City State ZIP Code Arlington VA 22206	

Outstanding Balance Beginning This Period 2000.00	Transaction ID: SD10.65271	
Amount Incurred This Period 0.00	Payment This Period 2000.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LUKENS COMPANY'	Nature of Debt (Purpose): PAC - Direct Mail Consult- ing
Mailing Address 2800 Shirlington Road 9th Floor	
City State ZIP Code Arlington VA 22206	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.66226	
Amount Incurred This Period 2000.00	Payment This Period 2000.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	-1022.32
2) TOTALS This Period (last page this line number only).....	▶	3525.24
3) TOTALS 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)	▶	