

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

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

ADDRESS (number and street)

555 Capitol Mall, Suite 400

Check if different  
than previously  
reported. (ACC)

Sacramento

CA

95814

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00626119

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



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 (12S)

Election on

M M /

D D /

Y Y Y Y Y Y

11

06

2018

in the  
State of

CA

(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

10

01

2018

through

M M /

D D /

Y Y Y Y Y Y

10

17

2018

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

Pulaski, Art, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Pulaski, Art, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

12

07

2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

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

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2018</span>		<span style="border: 1px solid black; padding: 2px;">402398.28</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">229778.82</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">462378.88</span>	<span style="border: 1px solid black; padding: 2px;">2589738.75</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">692157.70</span>	<span style="border: 1px solid black; padding: 2px;">2992137.03</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">556881.89</span>	<span style="border: 1px solid black; padding: 2px;">2856861.22</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">135275.81</span>	<span style="border: 1px solid black; padding: 2px;">135275.81</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

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

Report Covering the Period:

From:

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

To:

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5812.21	5812.21
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5812.21	5812.21
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	456566.67	2583555.24
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	462378.88	2589367.45
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	371.30
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	462378.88	2589738.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	462378.88	2589738.75

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	257312.50	1991350.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	257312.50	1991350.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	149000.00	324000.00
24. Independent Expenditures (use Schedule E) .....	252283.39	459949.88
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	100000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	100000.00
29. Other Disbursements (Including Non-Federal Donations).....	- 101714.00	- 18439.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	556881.89	2856861.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	556881.89	2856861.22

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	462378.88	2589367.45
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	100000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	462378.88	2489367.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	257312.50	1991350.34
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	257312.50	1991350.34

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

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

FOR LINE NUMBER: PAGE 6 OF 40  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. California Federation of Teachers**

Mailing Address 2550 North Hollywood Way, #400

City  
Burbank

State  
CA

Zip Code  
91505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.91

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 13 / 2018

**Transaction ID : INCA466**

Amount of Each Receipt this Period

436.91

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Service Employees International Union United Service Workers West (SEIU USWW)**

Mailing Address 828 West Washington Blvd.

City  
Los Angeles

State  
CA

Zip Code  
90015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5375.30

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 01 / 2018

**Transaction ID : INCA458**

Amount of Each Receipt this Period

5275.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Service Employees International Union United Service Workers West (SEIU USWW)**

Mailing Address 828 West Washington Blvd.

City  
Los Angeles

State  
CA

Zip Code  
90015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5375.30

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 13 / 2018

**Transaction ID : INCA459**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

5812.21

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

5812.21

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

Form/Schedule: SA11AI

Transaction ID : INCA466

In-kind Contribution - Staff Time, Food and Travel Expenses

Form/Schedule: SA11AI

Transaction ID: INCA458

In-kind Contribution - Staff Time

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA459

In-kind Contribution - Data

Form/Schedule:

Transaction ID:



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 40

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. House Majority PAC**

Mailing Address 700 13th Street, NW

City  
Washington

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

77283.34

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 01 / 2018

**Transaction ID : INCA453**

Amount of Each Receipt this Period

21566.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Million More Voters, Sponsored by the California Labor Federation, AFL-CIO**

Mailing Address 600 Grand Avenue, Suite 410

City  
Oakland

State  
CA

Zip Code  
94610

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

47000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 01 / 2018

**Transaction ID : INCA451**

Amount of Each Receipt this Period

47000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. NextGen Climate Action Committee**

Mailing Address 700 13th Street, NW, Suite 600

City  
Washington

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1531271.90

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 08 / 2018

**Transaction ID : INCA339**

Amount of Each Receipt this Period

350000.00

☐ Memo Item

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

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

418566.67

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

Form/Schedule: SA11C

Transaction ID : INCA453

In-Kind Contribution - Research

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 11 OF 40  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Protect Our Kids and Our Healthcare PAC**

Mailing Address 3055 Wilshire Blvd., Suite 1050

City  
Los Angeles

State  
CA

Zip Code  
90017

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

38000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 08 / 2018

**Transaction ID : INCA363**

Amount of Each Receipt this Period

38000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

38000.00

456566.67

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

Form/Schedule: SA11C  
Transaction ID : INCA363

In-kind Contribution - Polling

Form/Schedule:  
Transaction ID:

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 40

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

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

Full Name (Last, First, Middle Initial)

**A. Million Voter Project Action Fund**

Date of Disbursement

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

Mailing Address 777 South Figueroa Street  
Suite 4050City  
Los AngelesState  
CAZip Code  
90017Purpose of Disbursement  
Voter registration and issue advocacy campaign

005

Candidate Name

Million Voter Project Action Fund

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : EXPB342

Amount of Each Disbursement this Period

80000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Valley Forward**

Date of Disbursement

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

Mailing Address 3485 West Shaw, Suite 101

City  
FresnoState  
CAZip Code  
93711Purpose of Disbursement  
Voter registration and issue advocacy campaign

005

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : EXPB308

Amount of Each Disbursement this Period

27312.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Working America**

Date of Disbursement

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

Mailing Address 815 16th Street, NW

City  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
Voter registration and issue advocacy campaign

005

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : EXPB309

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

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

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

207312.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 40

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

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

Full Name (Last, First, Middle Initial)

**A. Working America**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		10		2018

Mailing Address 815 16th Street, NW

City  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
Voter registration and issue advocacy campaign

005

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : EXPB340

Amount of Each Disbursement this Period

50000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

50000.00

257312.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 40

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

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

NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Committee for a Better Tomorrow Sponsored by Los Angeles County Federation of Labor**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			11			2018			

Mailing Address 777 South Figueroa Street  
Suite 4050City  
Los AngelesState  
CAZip Code  
90017Purpose of Disbursement  
Contribution

011

Candidate Name

Committee for a Better Tomorrow Sponsored by Los Angeles County Federation of Labor

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : EXPB350**

Amount of Each Disbursement this Period

50000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Fight Back California**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			11			2018			

Mailing Address 1787 Tribute Road, Suite K

City  
SacramentoState  
CAZip Code  
95815Purpose of Disbursement  
Contribution

011

Candidate Name

**Fight Back California**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : EXPB344**

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Flip the 49! Neighbors in Action**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			10			2018			

Mailing Address 555 Capitol Mall, Suite 400

City  
SacramentoState  
CAZip Code  
95814Purpose of Disbursement  
Contribution

011

Candidate Name

**Flip the 49! Neighbors in Action**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : EXPB343**

Amount of Each Disbursement this Period

85000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

139000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 40

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

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

Full Name (Last, First, Middle Initial)

**A. Valley Works**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		11		2018

Mailing Address 3485 West Shaw Avenue, Suite 101

City  
FresnoState  
CAZip Code  
93711Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

Valley Works

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : EXPB345

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10000.00

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

149000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 40

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Equality California**

Mailing Address 515 South Figueroa Street, Suite 1

City  
Los AngelesState  
CAZip Code  
90071Purpose of Disbursement  
Civic Donation

012

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EXPB351

Amount of Each Disbursement this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Million Voter Project Action Fund**Mailing Address 777 South Figueroa Street  
Suite 4050City  
Los AngelesState  
CAZip Code  
90017Purpose of Disbursement  
Offset for independent expenditure paid in prior period; disseminated in  
current period

24A

Category/  
Type

Candidate Name

**Million Voter Project Action Fund**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EXPB424

Amount of Each Disbursement this Period

- 50150.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Million Voter Project Action Fund**Mailing Address 777 South Figueroa Street  
Suite 4050City  
Los AngelesState  
CAZip Code  
90017Purpose of Disbursement  
Offset for independent expenditure paid in prior period; disseminated in  
current period

24E

Category/  
Type

Candidate Name

**Million Voter Project Action Fund**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EXPB425

Amount of Each Disbursement this Period

- 59523.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

- 84674.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 40

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Orange County Voter Information Project**

Mailing Address 309 North Rampart Street, Suite A

City  
OrangeState  
CAZip Code  
92868

Purpose of Disbursement

Offset for independent expenditure paid in prior period; disseminated in

Candidate Name

24E

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				01				2018					

FEC Identification Number

C

Transaction ID : EXPB433

Amount of Each Disbursement this Period

- 4530.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Orange County Voter Information Project**

Mailing Address 309 North Rampart Street, Suite A

City  
OrangeState  
CAZip Code  
92868

Purpose of Disbursement

Offset for independent expenditure paid in prior period; disseminated in

Candidate Name

24A

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				01				2018					

FEC Identification Number

C

Transaction ID : EXPB432

Amount of Each Disbursement this Period

- 4530.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Orange County Voter Information Project**

Mailing Address 309 North Rampart Street, Suite A

City  
OrangeState  
CAZip Code  
92868

Purpose of Disbursement

Offset for independent expenditure paid in prior period; disseminated in

Candidate Name

24A

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				01				2018					

FEC Identification Number

C

Transaction ID : EXPB434

Amount of Each Disbursement this Period

- 3990.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 13050.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 40

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Orange County Voter Information Project**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		01		2018

Mailing Address 309 North Rampart Street, Suite A

City  
OrangeState  
CAZip Code  
92868

Purpose of Disbursement

Offset for independent expenditure paid in prior period; disseminated in

Candidate Name

24E

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : EXPB436

Amount of Each Disbursement this Period

- 3990.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

- 3990.00

- 101714.00

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 20 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>				
Full Name of Payee <input type="checkbox"/> Memo Item <b>California Federation of Teachers</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 13 / 2018	
Mailing Address 2550 North Hollywood Way, #400			Amount <span style="border: 1px solid black; padding: 2px;">436.91</span>	
City Burbank	State CA	Zip Code 91505	<b>Transaction ID : EDTEALC163</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 13 / 2018	
Purpose of Expenditure Staff Time, Food and Travel Expenses; In-kind		Category/Type <span style="border: 1px solid black; padding: 2px;">24E</span>		
Name of Federal Candidate: Hill, Katie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 25 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">92887.57</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item <b>House Majority PAC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 02 / 2018	
Mailing Address 700 13th Street, NW			Amount <span style="border: 1px solid black; padding: 2px;">3250.00</span>	
City Washington	State DC	Zip Code 20005	<b>Transaction ID : EDTEALC110</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 02 / 2018	
Purpose of Expenditure Research; In-kind		Category/Type <span style="border: 1px solid black; padding: 2px;">24A</span>		
Name of Federal Candidate: Kim, Young, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 39 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">34234.02</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<span style="border: 1px solid black; padding: 2px;">3686.91</span>	
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<span style="border: 1px solid black; padding: 2px;"></span>	
<b>(c) TOTAL Independent Expenditures .....</b>			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Pulaski, Art, , ,</u>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 07 / 2018	
<i>[Electronically Filed]</i>				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 21 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>House Majority PAC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 02 / 2018</div> </div>		
Mailing Address 700 13th Street, NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3250.00</div>		
City Washington	State DC	Zip Code 20005	<b>Transaction ID : EDTEALC111</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 02 / 2018</div> </div>		
Purpose of Expenditure Research; In-kind		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24E</div>			
Name of Federal Candidate: Cisneros, Gil, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 39 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">34234.02</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>House Majority PAC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 03 / 2018</div> </div>		
Mailing Address 700 13th Street, NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4833.34</div>		
City Washington	State DC	Zip Code 20005	<b>Transaction ID : EDTEALC126</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 03 / 2018</div> </div>		
Purpose of Expenditure Research; In-kind		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24E</div>			
Name of Federal Candidate: Porter, Katie, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 45 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">38298.84</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">8083.34</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

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

Pulaski, Art, , ,

Signature

*[Electronically Filed]*

Date  /  /

12 / 07 / 2018

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 22 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 03 / 2018       </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>House Majority PAC</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 03 / 2018       </div>		
Mailing Address 700 13th Street, NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         2700.00       </div>		
City Washington		State DC	Zip Code 20005	<b>Transaction ID : EDTEALC127</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 03 / 2018       </div>	
Purpose of Expenditure Research; In-kind		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24E</div>			
Name of Federal Candidate: Rouda, Harley, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 48 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         15065.49       </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item <b>House Majority PAC</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 03 / 2018       </div>		
Mailing Address 700 13th Street, NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         4833.33       </div>		
City Washington		State DC	Zip Code 20005	<b>Transaction ID : EDTEALC128</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 03 / 2018       </div>	
Purpose of Expenditure Research; In-kind		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>			
Name of Federal Candidate: Walters, Mimi, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 45 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         38298.84       </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         7533.33       </div>	<b>▶</b>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>	<b>▶</b>	
<b>(c) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         7533.33       </div>	<b>▶</b>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Pulaski, Art, , ,</u>			[Electronically Filed]	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          12 / 07 / 2018       </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 23 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)

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

FEC IDENTIFICATION NUMBER ▼

C

C00626119

 Check if ☐ 24-hour report ☐ 48-hour report

New report

Amends report filed on

 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2018

 Full Name of Payee  
 House Majority PAC
☐ Memo Item

Date of Public Distribution/Dissemination

 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2018

Mailing Address 700 13th Street, NW

Amount

2700.00

City

State

Zip Code

Washington

DC

20005

 Purpose of Expenditure  
 Research; In-kind

 Category/  
 Type

24A

Transaction ID : EDTEALC129

Date of Disbursement or Obligation

 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2018

Name of Federal Candidate:

☐ Support

Office Sought:

☒ House

District: 48

Rohrabacher, Dana, , ,

☒ Oppose☐ President☐ Senate

State: CA

 Calendar Year-To-Date  
 Per Election for Office Sought

15065.49

 Disbursement For: ☐ Primary ☒ General  
 2018 ☐ Other (specify) ►

Full Name of Payee

☐ Memo Item

Million More Voters, Sponsored by the California Labor Federation, AFL-CIO

Date of Public Distribution/Dissemination

 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2018

Mailing Address 600 Grand Avenue, Suite 410

Amount

7833.33

City

State

Zip Code

Oakland

CA

94610

 Purpose of Expenditure  
 Research; In-kind

 Category/  
 Type

24E

Transaction ID : EDTEALC102

Date of Disbursement or Obligation

 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2018

Name of Federal Candidate:

☒ Support

Office Sought:

☒ House

District: 21

Cox, TJ, , ,

☐ Oppose☐ President☐ Senate

State: CA

 Calendar Year-To-Date  
 Per Election for Office Sought

228288.63

 Disbursement For: ☐ Primary ☒ General  
 2018 ☐ Other (specify) ►

(a) SUBTOTAL of Itemized Independent Expenditures .....

10533.33

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures .....

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

Pulaski, Art, , ,

[Electronically Filed]

Date

 M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2018

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 24 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>				
Full Name of Payee <input type="checkbox"/> Memo Item <b>Million More Voters, Sponsored by the California Labor Federation, AFL-CIO</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 03 / 2018	
Mailing Address 600 Grand Avenue, Suite 410			Amount <span style="border: 1px solid black; padding: 2px;">7833.33</span>	
City Oakland	State CA	Zip Code 94610	<b>Transaction ID : EDTEALC104</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 01 / 2018	
Purpose of Expenditure Research; In-kind		Category/ Type <span style="border: 1px solid black; padding: 2px;">24A</span>		
Name of Federal Candidate: Valadao, David, , ,			Office Sought: <input checked="" type="checkbox"/> House    District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">228288.63</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Million More Voters, Sponsored by the California Labor Federation, AFL-CIO</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 03 / 2018	
Mailing Address 600 Grand Avenue, Suite 410			Amount <span style="border: 1px solid black; padding: 2px;">7833.34</span>	
City Oakland	State CA	Zip Code 94610	<b>Transaction ID : EDTEALC149</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 01 / 2018	
Purpose of Expenditure Research; In-kind		Category/ Type <span style="border: 1px solid black; padding: 2px;">24E</span>		
Name of Federal Candidate: Porter, Katie, , ,			Office Sought: <input checked="" type="checkbox"/> House    District: 45 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">38298.84</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<span style="border: 1px solid black; padding: 2px;">15666.67</span>	
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<span style="border: 1px solid black; padding: 2px;"></span>	
<b>(c) TOTAL Independent Expenditures .....</b>			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Pulaski, Art, , ,</u>			Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 07 / 2018	
<i>[Electronically Filed]</i>				



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 25 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>											
Full Name of Payee <input type="checkbox"/> Memo Item <b>Million More Voters, Sponsored by the California Labor Federation, AFL-CIO</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 03 / 2018							
Mailing Address 600 Grand Avenue, Suite 410				Amount <span style="border: 1px solid black; padding: 2px;">7833.34</span>							
City Oakland		State CA		Zip Code 94610							
Purpose of Expenditure Research; In-kind				Category/Type <span style="border: 1px solid black; padding: 2px;">24A</span>							
Name of Federal Candidate: Walters, Mimi, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 45 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">38298.84</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <input type="checkbox"/> Memo Item <b>Million More Voters, Sponsored by the California Labor Federation, AFL-CIO</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 14 / 2018							
Mailing Address 600 Grand Avenue, Suite 410				Amount <span style="border: 1px solid black; padding: 2px;">7833.33</span>							
City Oakland		State CA		Zip Code 94610							
Purpose of Expenditure Research; In-kind				Category/Type <span style="border: 1px solid black; padding: 2px;">24E</span>							
Name of Federal Candidate: Hill, Katie, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 25 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">92887.57</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶							
<table style="width: 100%;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width: 40%; text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;">15666.67</span></td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> <tr> <td>(c) TOTAL Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">15666.67</span>	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <span style="border: 1px solid black; padding: 2px;"></span>	(c) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>
(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">15666.67</span>										
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
(c) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>Pulaski, Art, , ,</u>				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 07 / 2018							

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 26 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>				
Full Name of Payee <input type="checkbox"/> Memo Item <b>Million More Voters, Sponsored by the California Labor Federation, AFL-CIO</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 14 / 2018	
Mailing Address 600 Grand Avenue, Suite 410			Amount <span style="border: 1px solid black; padding: 2px;">7833.33</span>	
City Oakland	State CA	Zip Code 94610	<b>Transaction ID : EDTEALC105</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 01 / 2018	
Purpose of Expenditure Research; In-kind		Category/ Type <span style="border: 1px solid black; padding: 2px;">24A</span>		
Name of Federal Candidate: Knight, Steve, , ,			Office Sought: <input checked="" type="checkbox"/> House    District: 25 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">92887.57</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Million Voter Project Action Fund</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 01 / 2018	
Mailing Address 777 South Figueroa Street Suite 4050			Amount <span style="border: 1px solid black; padding: 2px;">43723.50</span>	
City Los Angeles	State CA	Zip Code 90017	<b>Transaction ID : EDTEALC97</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 01 / 2018	
Purpose of Expenditure Phone Banking and Walk Program; 10/1/18-10/17/18		Category/ Type <span style="border: 1px solid black; padding: 2px;">24E</span>		
Name of Federal Candidate: Cox, TJ, , ,			Office Sought: <input checked="" type="checkbox"/> House    District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">228288.63</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<span style="border: 1px solid black; padding: 2px;">51556.83</span>	
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<span style="border: 1px solid black; padding: 2px;"></span>	
<b>(c) TOTAL Independent Expenditures .....</b>			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Pulaski, Art, , ,</u>		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 07 / 2018		<b>[Electronically Filed]</b>



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 28 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Million Voter Project Action Fund</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 01 / 2018</div> </div>		
Mailing Address <b>777 South Figueroa Street</b> <b>Suite 4050</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">43723.50</div>		
City Los Angeles	State CA	Zip Code 90017	<b>Transaction ID : EDTEALC100</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 01 / 2018</div> </div>		
Purpose of Expenditure Phone Banking and Walk Program; 10/1/18-10/17/18		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>			
Name of Federal Candidate: Valadao, David, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 21 State: CA		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">228288.63</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Million Voter Project Action Fund</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 01 / 2018</div> </div>		
Mailing Address <b>777 South Figueroa Street</b> <b>Suite 4050</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6427.00</div>		
City Los Angeles	State CA	Zip Code 90017	<b>Transaction ID : EDTEALC101</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 01 / 2018</div> </div>		
Purpose of Expenditure Phone Banking and Walk Program; 10/1/18-10/17/18		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>			
Name of Federal Candidate: Knight, Steve, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 25 State: CA		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">92887.57</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">50150.50</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

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

*Pulaski, Art, , ,*  
 Signature

*[Electronically Filed]*

Date 

/  /

12 / 07 / 2018

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 29 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>Orange County Voter Information Project</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 01 / 2018	
Mailing Address 309 North Rampart Street, Suite A				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4530.00</div>	
City Orange		State CA		Zip Code 92868	
Purpose of Expenditure Canvassing; 10/1/18-10/17/18				Category/Type <span style="border: 1px solid black; padding: 2px;">24A</span>	
Name of Federal Candidate: Kim, Young, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 39 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">34234.02</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Orange County Voter Information Project</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 01 / 2018	
Mailing Address 309 North Rampart Street, Suite A				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4530.00</div>	
City Orange		State CA		Zip Code 92868	
Purpose of Expenditure Canvassing; 10/1/18-10/17/18				Category/Type <span style="border: 1px solid black; padding: 2px;">24E</span>	
Name of Federal Candidate: Cisneros, Gil, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 39 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">34234.02</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">9060.00</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div><b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div><b>(c) TOTAL</b> Independent Expenditures .....</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Pulaski, Art, , ,</u>				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 07 / 2018	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 30 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>Orange County Voter Information Project</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> <div style="display: flex; justify-content: space-around;"> <span>10</span><span>01</span><span>2018</span> </div>	
Mailing Address 309 North Rampart Street, Suite A				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2250.00</div>	
City Orange		State CA		Zip Code 92868	
Purpose of Expenditure Canvassing; 10/1/18-10/17/18				Category/Type <span style="border: 1px solid black; padding: 2px;">24E</span>	
Name of Federal Candidate: Porter, Katie, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 45 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">38298.84</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Orange County Voter Information Project</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> <div style="display: flex; justify-content: space-around;"> <span>10</span><span>01</span><span>2018</span> </div>	
Mailing Address 309 North Rampart Street, Suite A				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1740.00</div>	
City Orange		State CA		Zip Code 92868	
Purpose of Expenditure Canvassing; 10/1/18-10/17/18				Category/Type <span style="border: 1px solid black; padding: 2px;">24E</span>	
Name of Federal Candidate: Rouda, Harley, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 48 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">15065.49</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">3990.00</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Pulaski, Art, , ,</u>				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> <div style="display: flex; justify-content: space-around;"> <span>12</span><span>07</span><span>2018</span> </div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 31 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Orange County Voter Information Project</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>		
Mailing Address 309 North Rampart Street, Suite A			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2250.00</div>		
City Orange	State CA	Zip Code 92868	<b>Transaction ID : EDTEALC120</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>		
Purpose of Expenditure Canvassing; 10/1/18-10/17/18		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Walters, Mimi, , ,		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">38298.84</div>		Office Sought: <input checked="" type="checkbox"/> House District: 45 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶			

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Orange County Voter Information Project</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>		
Mailing Address 309 North Rampart Street, Suite A			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1740.00</div>		
City Orange	State CA	Zip Code 92868	<b>Transaction ID : EDTEALC121</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>		
Purpose of Expenditure Canvassing; 10/1/18-10/17/18		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Rohrabacher, Dana, , ,		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">15065.49</div>		Office Sought: <input checked="" type="checkbox"/> House District: 48 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶			

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">3990.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

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

Signature  
 Pulaski, Art, , ,

Date  /  /

**[Electronically Filed]**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 32 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 08 / 2018       </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Protect Our Kids and Our Healthcare PAC</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 08 / 2018       </div>		
Mailing Address 3055 Wilshire Blvd., Suite 1050			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         19000.00       </div>		
City Los Angeles	State CA	Zip Code 90017	<b>Transaction ID : EDTEALC151</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 08 / 2018       </div>		
Purpose of Expenditure Polling		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24E</div>			
Name of Federal Candidate: Cox, TJ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         228288.63       </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item <b>Protect Our Kids and Our Healthcare PAC</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 08 / 2018       </div>		
Mailing Address 3055 Wilshire Blvd., Suite 1050			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         19000.00       </div>		
City Los Angeles	State CA	Zip Code 90017	<b>Transaction ID : EDTEALC152</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 08 / 2018       </div>		
Purpose of Expenditure Polling		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>			
Name of Federal Candidate: Valadao, David, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         228288.63       </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         38000.00       </div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         38000.00       </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Pulaski, Art, , ,</u>		[Electronically Filed]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          12 / 07 / 2018       </div>	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 33 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Reliable Translations, Inc.</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 121 West Lexington Drive Suite L106D				Amount <div style="border: 1px solid black; padding: 2px; font-size: small;"> <span style="float: right;">38.94</span> </div>	
City Glendale		State CA		Zip Code 91203	
Purpose of Expenditure Translation Services				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>	
Name of Federal Candidate: <span style="float: right;"><input type="checkbox"/> Support</span> Kim, Young, , , <span style="float: right;"><input checked="" type="checkbox"/> Oppose</span>				Office Sought: <input checked="" type="checkbox"/> House    District: 39 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; font-size: small;"> <span style="float: right;">34234.02</span> </div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Reliable Translations, Inc.</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 121 West Lexington Drive Suite L106D				Amount <div style="border: 1px solid black; padding: 2px; font-size: small;"> <span style="float: right;">38.94</span> </div>	
City Glendale		State CA		Zip Code 91203	
Purpose of Expenditure Translation Services				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24E</div>	
Name of Federal Candidate: <span style="float: right;"><input checked="" type="checkbox"/> Support</span> Cisneros, Gil, , , <span style="float: right;"><input type="checkbox"/> Oppose</span>				Office Sought: <input checked="" type="checkbox"/> House    District: 39 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; font-size: small;"> <span style="float: right;">34234.02</span> </div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: small;"> <span style="float: right;">77.88</span> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: small;"> <span style="float: right;"> </span> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: small;"> <span style="float: right;"> </span> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Pulaski, Art, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 34 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Reliable Translations, Inc.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 11 / 2018</div> </div>		
Mailing Address 121 West Lexington Drive Suite L106D			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">24.40</div>		
City Glendale	State CA	Zip Code 91203	<b>Transaction ID : EDTEALC157</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 17 / 2018</div> </div>		
Purpose of Expenditure Translation Services			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24E</div>		
Name of Federal Candidate: Cox, TJ, , ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Reliable Translations, Inc.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 11 / 2018</div> </div>		
Mailing Address 121 West Lexington Drive Suite L106D			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">24.40</div>		
City Glendale	State CA	Zip Code 91203	<b>Transaction ID : EDTEALC158</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 17 / 2018</div> </div>		
Purpose of Expenditure Translation Services			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>		
Name of Federal Candidate: Valadao, David, , ,			Office Sought: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">48.80</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

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

Signature Pulaski, Art, , ,  

[Electronically Filed]

Date 

/  /

12 / 07 / 2018

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 35 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>S&amp;S Printers</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address    2100 West Lincoln Avenue			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1532.74</div>		
City Anaheim	State CA	Zip Code 92801	<b>Transaction ID : EDTEALC122</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Printing		Category/ Type <div style="border: 1px solid black; padding: 2px;">24A</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Walters, Mimi, , ,			Office Sought: <input checked="" type="checkbox"/> House    District: 45 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">38298.84</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>S&amp;S Printers</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address    2100 West Lincoln Avenue			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1532.74</div>		
City Anaheim	State CA	Zip Code 92801	<b>Transaction ID : EDTEALC123</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Printing		Category/ Type <div style="border: 1px solid black; padding: 2px;">24A</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Rohrabacher, Dana, , ,			Office Sought: <input checked="" type="checkbox"/> House    District: 48 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">15065.49</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">3065.48</div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Pulaski, Art, , ,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 36 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>S&amp;S Printers</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address    2100 West Lincoln Avenue			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1532.75</div>		
City Anaheim	State CA	Zip Code 92801	<b>Transaction ID : EDTEALC124</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Printing		Category/ Type <b>24E</b>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Rouda, Harley, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: <u>48</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">15065.49</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>S&amp;S Printers</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address    2100 West Lincoln Avenue			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1532.75</div>		
City Anaheim	State CA	Zip Code 92801	<b>Transaction ID : EDTEALC125</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Printing		Category/ Type <b>24E</b>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Porter, Katie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: <u>45</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">38298.84</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">3065.50</div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Pulaski, Art, , ,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 37 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> <span>C00626119</span> </div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Full Name of Payee <b>S&amp;S Printers</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Mailing Address    2100 West Lincoln Avenue			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2122.67</div>		<b>Transaction ID : EDTEALC155</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
City Anaheim		State CA		Zip Code 92801		
Purpose of Expenditure Printing			Category/ Type <div style="border: 1px solid black; padding: 2px;">24E</div>		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Kim, Young, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">34234.02</div>				Office Sought: <input checked="" type="checkbox"/> House    District: 39 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶						
Full Name of Payee <b>S&amp;S Printers</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Mailing Address    2100 West Lincoln Avenue			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2122.68</div>		<b>Transaction ID : EDTEALC156</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
City Anaheim		State CA		Zip Code 92801		
Purpose of Expenditure Printing			Category/ Type <div style="border: 1px solid black; padding: 2px;">24E</div>		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Cisneros, Gil, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">34234.02</div>				Office Sought: <input checked="" type="checkbox"/> House    District: 39 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶						
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">4245.35</div> </div> </div>						
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>						
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Signature <u>Pulaski, Art, , ,</u>				Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
[Electronically Filed]				12 / 07 / 2018		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 38 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input type="checkbox"/> Memo Item Service Employees International Union United Service Workers West (SEIU USWW)		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2018         </div>	
Mailing Address 828 West Washington Blvd.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2637.65         </div>	
City Los Angeles	State CA	Zip Code 90015	<b>Transaction ID : EDTEALC161</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2018         </div>
Purpose of Expenditure Staff Time and Travel Expenses; 10/1/18-10/17/18; In-kind		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>	
Name of Federal Candidate: Kim, Young, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 39 State: CA	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">34234.02</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input type="checkbox"/> Memo Item Service Employees International Union United Service Workers West (SEIU USWW)		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2018         </div>	
Mailing Address 828 West Washington Blvd.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2637.65         </div>	
City Los Angeles	State CA	Zip Code 90015	<b>Transaction ID : EDTEALC162</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2018         </div>
Purpose of Expenditure Staff Time and Travel Expenses; 10/1/18-10/17/18; In-kind		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24E</div>	
Name of Federal Candidate: Cisneros, Gil, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 39 State: CA	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">34234.02</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">5275.30</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

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

Pulaski, Art, , , [Electronically Filed]  
 Signature Date 

M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2018

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 39 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item Service Employees International Union United Service Workers West (SEIU USWW)			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 13 / 2018		
Mailing Address 828 West Washington Blvd.			Amount <span style="border: 1px solid black; padding: 2px; display: inline-block;">50.00</span>		
City Los Angeles	State CA	Zip Code 90015	<b>Transaction ID : EDTEALC159</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 13 / 2018		
Purpose of Expenditure Data; In-kind		Category/Type <span style="border: 1px solid black; padding: 2px;">24A</span>			
Name of Federal Candidate: <input type="checkbox"/> Support Kim, Young, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 39 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">34234.02</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item Service Employees International Union United Service Workers West (SEIU USWW)			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 13 / 2018		
Mailing Address 828 West Washington Blvd.			Amount <span style="border: 1px solid black; padding: 2px; display: inline-block;">50.00</span>		
City Los Angeles	State CA	Zip Code 90015	<b>Transaction ID : EDTEALC160</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 13 / 2018		
Purpose of Expenditure Data; In-kind		Category/Type <span style="border: 1px solid black; padding: 2px;">24E</span>			
Name of Federal Candidate: <input checked="" type="checkbox"/> Support Cisneros, Gil, , , <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 39 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">34234.02</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<span style="border: 1px solid black; padding: 2px; display: inline-block;">100.00</span>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<span style="border: 1px solid black; padding: 2px; display: inline-block;"></span>		
<b>(c) TOTAL Independent Expenditures .....</b>			<span style="border: 1px solid black; padding: 2px; display: inline-block;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Pulaski, Art, , ,</u>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 07 / 2018	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 40 OF 40  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00626119         </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>											
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Valley Forward</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2018							
Mailing Address    3485 West Shaw, Suite 101				Amount <span style="border: 1px solid black; padding: 2px;">1343.75</span>							
City Fresno		State CA		Zip Code 93711							
Purpose of Expenditure Canvassing; 10/1/18-10/17/18				Category/Type <span style="border: 1px solid black; padding: 2px;">24E</span>							
Name of Federal Candidate: Cox, TJ, , ,				Office Sought: <input checked="" type="checkbox"/> House    District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">228288.63</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Valley Forward</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2018							
Mailing Address    3485 West Shaw, Suite 101				Amount <span style="border: 1px solid black; padding: 2px;">1343.75</span>							
City Fresno		State CA		Zip Code 93711							
Purpose of Expenditure Canvassing; 10/1/18-10/17/18				Category/Type <span style="border: 1px solid black; padding: 2px;">24A</span>							
Name of Federal Candidate: Valadao, David, , ,				Office Sought: <input checked="" type="checkbox"/> House    District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">228288.63</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶							
<table style="width: 100%;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width: 40%; text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;">2687.50</span></td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> <tr> <td>(c) TOTAL Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;">252283.39</span></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">2687.50</span>	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <span style="border: 1px solid black; padding: 2px;"></span>	(c) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">252283.39</span>
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(c) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">252283.39</span>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>Pulaski, Art, , ,</u>				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 07 / 2018							

[Electronically Filed]