



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**CAMPAIGN FOR JOBS AND OPPORTUNITY**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1412.11"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="23000.00"/>	<input type="text" value="745337.85"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="24412.11"/>	<input type="text" value="745337.85"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="21221.23"/>	<input type="text" value="742146.97"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3190.88"/>	<input type="text" value="3190.88"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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. 06/2004)

Write or Type Committee Name

**CAMPAIGN FOR JOBS AND OPPORTUNITY**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	23000.00	724337.85
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	23000.00	724337.85
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	21000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	23000.00	745337.85
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	0.00
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))..... ▶	23000.00	745337.85
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	23000.00	745337.85

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	21221.23	107206.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	21221.23	107206.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	7000.00
24. Independent Expenditures (use Schedule E) .....	0.00	361347.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	266593.15
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	21221.23	742146.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21221.23	742146.97

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	23000.00	745337.85
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	23000.00	745337.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	21221.23	107206.82
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	21221.23	107206.82

**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 14  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR JOBS AND OPPORTUNITY**

Full Name (Last, First, Middle Initial)  
**A. REPUBLICAN ATTORNEYS GENERAL ASSOCIATION**

Mailing Address 1747 PENNSYLVANIA AVENUE, NW, SUIT

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
178000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 09 / 2014

**Transaction ID : SA11AI.4419**

Amount of Each Receipt this Period  
23000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	23000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	23000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR JOBS AND OPPORTUNITY**

Full Name (Last, First, Middle Initial)

**A. BULLDOG COMPLIANCE**

Mailing Address 500 CUMMINGS CTR  
SUITE 4200

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 10 / 2014

Transaction ID : SB21B.4426

Amount of Each Disbursement this Period

1.44

Full Name (Last, First, Middle Initial)

**B. BULLDOG COMPLIANCE**

Mailing Address 500 CUMMINGS CTR  
SUITE 4200

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 10 / 2014

Transaction ID : SB21B.4427

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. BULLDOG COMPLIANCE**

Mailing Address 500 CUMMINGS CTR  
SUITE 4200

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 10 / 2014

Transaction ID : SB21B.4428

Amount of Each Disbursement this Period

1000.00

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

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

2001.44

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR JOBS AND OPPORTUNITY**

Full Name (Last, First, Middle Initial)

**A. BULLDOG COMPLIANCE**

Mailing Address 500 CUMMINGS CTR  
SUITE 4200

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 10 / 2014

Transaction ID : SB21B.4429

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. JACKSON KELLY PLLC**

Mailing Address PO BOX 11276

City CHARLESTON State WV Zip Code 25339

Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 10 / 2014

Transaction ID : SB21B.4421

Amount of Each Disbursement this Period

177.50

Full Name (Last, First, Middle Initial)

**C. JONES DAY**

Mailing Address 51 LOUISIANA AVENUE, N.W.

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 10 / 2014

Transaction ID : SB21B.4436

Amount of Each Disbursement this Period

3494.00

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

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

4671.50

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR JOBS AND OPPORTUNITY**

Full Name (Last, First, Middle Initial)

**A. JONES DAY**

Mailing Address 51 LOUISIANA AVENUE, N.W.

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 10 / 2014

Transaction ID : SB21B.4437

Amount of Each Disbursement this Period

540.00

Full Name (Last, First, Middle Initial)

**B. JONES DAY**

Mailing Address 51 LOUISIANA AVENUE, N.W.

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 10 / 2014

Transaction ID : SB21B.4438

Amount of Each Disbursement this Period

1918.50

Full Name (Last, First, Middle Initial)

**C. SQUIRE PATTON BOGGS**

Mailing Address 2550 M ST. NW

City WASHINGTON State DC Zip Code 20037

Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 10 / 2014

Transaction ID : SB21B.4430

Amount of Each Disbursement this Period

285.00

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

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

2743.50

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR JOBS AND OPPORTUNITY**

Full Name (Last, First, Middle Initial)

**A. WWP STRATEGIES**

Mailing Address P.O. BOX 147

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement  
STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 10 / 2014

Transaction ID : SB21B.4433

Amount of Each Disbursement this Period

2476.53

Full Name (Last, First, Middle Initial)

**B. WWP STRATEGIES**

Mailing Address P.O. BOX 147

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement  
STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 10 / 2014

Transaction ID : SB21B.4434

Amount of Each Disbursement this Period

9127.29

Full Name (Last, First, Middle Initial)

**C. WWP STRATEGIES**

Mailing Address P.O. BOX 147

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement  
STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 10 / 2014

Transaction ID : SB21B.4435

Amount of Each Disbursement this Period

200.97

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

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

11804.79

21221.23

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 14
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR JOBS AND OPPORTUNITY**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>BULLDOG COMPLIANCE</b>	Nature of Debt (Purpose): POSTAGE
Mailing Address 500 CUMMINGS CTR SUITE 4200	
City State Zip Code BEVERLY MA 01915	

Outstanding Balance Beginning This Period 1.44	<b>Transaction ID : SD10.4402</b>	
Amount Incurred This Period 0.00	Payment This Period 1.44	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>BULLDOG COMPLIANCE</b>	Nature of Debt (Purpose): COMPLIANCE CONSULTING
Mailing Address 500 CUMMINGS CTR SUITE 4200	
City State Zip Code BEVERLY MA 01915	

Outstanding Balance Beginning This Period 1000.00	<b>Transaction ID : SD10.4403</b>	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>BULLDOG COMPLIANCE</b>	Nature of Debt (Purpose): COMPLIANCE CONSULTING
Mailing Address 500 CUMMINGS CTR SUITE 4200	
City State Zip Code BEVERLY MA 01915	

Outstanding Balance Beginning This Period 1000.00	<b>Transaction ID : SD10.4404</b>	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 0.00

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 14
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR JOBS AND OPPORTUNITY**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>BULLDOG COMPLIANCE</b>	Nature of Debt (Purpose): COMPLIANCE CONSULTING
Mailing Address 500 CUMMINGS CTR SUITE 4200	
City State Zip Code BEVERLY MA 01915	

Outstanding Balance Beginning This Period 1000.00	<b>Transaction ID : SD10.4405</b>	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>JONES DAY</b>	Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 51 LOUISIANA AVENUE, N.W.	
City State Zip Code WASHINGTON DC 20001	

Outstanding Balance Beginning This Period 3494.00	<b>Transaction ID : SD10.4401</b>	
Amount Incurred This Period 0.00	Payment This Period 3494.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>JONES DAY</b>	Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 51 LOUISIANA AVENUE, N.W.	
City State Zip Code WASHINGTON DC 20001	

Outstanding Balance Beginning This Period 540.00	<b>Transaction ID : SD10.4400</b>	
Amount Incurred This Period 0.00	Payment This Period 540.00	Outstanding Balance at Close of This Period 0.00

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 14
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR JOBS AND OPPORTUNITY**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>JONES DAY</b>	Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 51 LOUISIANA AVENUE, N.W.	
City State Zip Code WASHINGTON DC 20001	

Outstanding Balance Beginning This Period 1918.50	<b>Transaction ID : SD10.4398</b>	
Amount Incurred This Period 0.00	Payment This Period 1918.50	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SQUIRE PATTON BOGGS</b>	Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 2550 M ST. NW	
City State Zip Code WASHINGTON DC 20037	

Outstanding Balance Beginning This Period 285.00	<b>Transaction ID : SD10.4397</b>	
Amount Incurred This Period 0.00	Payment This Period 285.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>WWP STRATEGIES</b>	Nature of Debt (Purpose): STRATEGY CONSULTING
Mailing Address P.O. BOX 147	
City State Zip Code ALEXANDRIA VA 22313	

Outstanding Balance Beginning This Period 2476.53	<b>Transaction ID : SD10.4407</b>	
Amount Incurred This Period 0.00	Payment This Period 2476.53	Outstanding Balance at Close of This Period 0.00

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 14
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR JOBS AND OPPORTUNITY**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>WWP STRATEGIES</b>	Nature of Debt (Purpose): STRATEGY CONSULTING
Mailing Address P.O. BOX 147	
City State Zip Code ALEXANDRIA VA 22313	

Outstanding Balance Beginning This Period <input type="text" value="9127.29"/>	<b>Transaction ID : SD10.4408</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="9127.29"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>WWP STRATEGIES</b>	Nature of Debt (Purpose): STRATEGY CONSULTING
Mailing Address P.O. BOX 147	
City State Zip Code ALEXANDRIA VA 22313	

Outstanding Balance Beginning This Period <input type="text" value="200.97"/>	<b>Transaction ID : SD10.4406</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="200.97"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

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

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

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