

# 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.   
AMERICAN WORKING FAMILIES

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 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  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Type or Print Name of Treasurer Bud Jackson

Signature of Treasurer Bud Jackson [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**AMERICAN WORKING FAMILIES**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="451.97"/>	<input type="text" value="451.97"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="352.37"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1237998.00"/>	<input type="text" value="1237988.00"/>
(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="1238350.37"/>	<input type="text" value="1238439.97"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1234317.38"/>	<input type="text" value="1234406.98"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4032.99"/>	<input type="text" value="4032.99"/>
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="3000.00"/>	

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

Write or Type Committee Name

AMERICAN WORKING FAMILIES

Report Covering the Period: From: 07 / 01 / 2013 To: 12 / 31 / 2013

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).....	862000.00	862000.00
(ii) Unitemized .....	0.00	-10.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	862000.00	861990.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	374998.00	374998.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1236998.00	1236988.00
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.).....	1000.00	1000.00
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))..... ▶	1237998.00	1237988.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1237998.00	1237988.00

**DETAILED SUMMARY PAGE**

of Disbursements

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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 .....	66338.99	66428.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	66338.99	66428.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
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 .....	1167978.39	1167978.39
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)) ..	1234317.38	1234406.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1234317.38	1234406.98

**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) .....	1236998.00	1236988.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1236998.00	1236988.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	66338.99	66428.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	66338.99	66428.59

**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 46  
(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)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)  
**A. American Federation of State County and Municipal Employees**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2013  
**Transaction ID : SA11AI.4270**

Amount of Each Receipt this Period  
50000.00

Full Name (Last, First, Middle Initial)  
**B. American Federation of State County and Municipal Employees**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2013  
**Transaction ID : SA11AI.4286**

Amount of Each Receipt this Period  
50000.00

Full Name (Last, First, Middle Initial)  
**C. Boilermakers-Blacksmiths Legislative Education-Action Program**

Mailing Address 753 State Street

City Kansas City State KS Zip Code 66101

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2013  
**Transaction ID : SA11AI.4219**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 105000.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 46  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)  
**A. Boilermakers-Blacksmith Legislative Education-Action Program**

Mailing Address 753 State Street

City State Zip Code  
Kansas City KS 66101

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2013  
**Transaction ID : SA11AI.4297**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**B. Boston Firefighters Local 718**

Mailing Address 60 Hallet Street

City State Zip Code  
Dorchester Ctr MA 02124

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 04 / 2013  
**Transaction ID : SA11AI.4181**

Amount of Each Receipt this Period  
30000.00

Full Name (Last, First, Middle Initial)  
**C. Boston Firefighters Local 718**

Mailing Address 60 Hallet Street

City State Zip Code  
Dorchester Ctr MA 02124

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
60000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 08 / 2013  
**Transaction ID : SA11AI.4256**

Amount of Each Receipt this Period  
30000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 62500.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 46  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)  
**A. Bridge and Structural Iron Workers Union Local 7**

Mailing Address 195 Old Colony Avenue

City Boston State MA Zip Code 02127

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2013  
**Transaction ID : SA11AI.4203**

Amount of Each Receipt this Period  
30000.00

Full Name (Last, First, Middle Initial)  
**B. Bridge and Structural Iron Workers Union Local 7**

Mailing Address 195 Old Colony Avenue

City Boston State MA Zip Code 02127

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
60000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2013  
**Transaction ID : SA11AI.4258**

Amount of Each Receipt this Period  
30000.00

Full Name (Last, First, Middle Initial)  
**C. International Association of Fire Fighters**

Mailing Address 1750 New York Avenue, NW

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 ▼  
15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2013  
**Transaction ID : SA11AI.4272**

Amount of Each Receipt this Period  
15000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75000.00

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



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

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

FOR LINE NUMBER: PAGE 9 OF 46  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial) <b>A. James F. Kelley</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2013 <b>Transaction ID : SA11AI.4267</b>
Mailing Address 12 Charles Place			Amount of Each Receipt this Period 1000.00
City Milton	State MA	Zip Code 02186	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00	
Name of Employer Thornton & Naumes, LLP		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. James F. Kelley</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2013 <b>Transaction ID : SA11AI.4295</b>
Mailing Address 12 Charles Place			Amount of Each Receipt this Period 5000.00
City Milton	State MA	Zip Code 02186	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 6000.00	
Name of Employer Thornton & Naumes, LLP		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. LIUNA</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 21 / 2013 <b>Transaction ID : SA11AI.4155</b>
Mailing Address 905 16th Street, NW			Amount of Each Receipt this Period 100000.00
City Washington	State DC	Zip Code 20006	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 100000.00	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	106000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 46  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

**A. LIUNA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 905 16th Street, NW  
 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 ▼ 250000.00  
 Date of Receipt 10 / 16 / 2013  
**Transaction ID : SA11AI.4264**  
 Amount of Each Receipt this Period 150000.00

**B. Catherine McDonnell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 63 Atlantic Ave #7E  
 City Boston State MA Zip Code 02110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation None Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00  
 Date of Receipt 10 / 24 / 2013  
**Transaction ID : SA11AI.4280**  
 Amount of Each Receipt this Period 1000.00

**C. John J McDonnell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 63 Atlantic Ave #7E  
 City Boston State MA Zip Code 02110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Fifth Generation Spirits Inc. Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00  
 Date of Receipt 09 / 04 / 2013  
**Transaction ID : SA11AI.4183**  
 Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 153500.00  
**TOTAL** This Period (last page this line number only).....▶

**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 46  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)  
**A. Ciaran Joseph McNelis**

Mailing Address 600 E 4th St

City State Zip Code  
Boston MA 02127

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

Name of Employer Occupation  
Cronin Group LLC Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 30 / 2013  
**Transaction ID : SA11AI.4177**

Amount of Each Receipt this Period  
25000.00

Full Name (Last, First, Middle Initial)  
**B. National Associatino of Government Employees**

Mailing Address 159 Burgin Parkway

City State Zip Code  
Quincy MA 02169

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2013  
**Transaction ID : SA11AI.4217**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**C. National Associatino of Government Employees**

Mailing Address 159 Burgin Parkway

City State Zip Code  
Quincy MA 02169

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2013  
**Transaction ID : SA11AI.4282**

Amount of Each Receipt this Period  
10000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial) <b>A. Darin S Samaraweera</b>		Date of Receipt MM / DD / YYYY 09 / 04 / 2013 <b>Transaction ID : SA11AI.4188</b>
Mailing Address 79 Florence St Apt 202		Amount of Each Receipt this Period 5000.00
City Chestnut Hill	State MA	Zip Code 02467
FEC ID number of contributing federal political committee. C	Name of Employer KSS Realty Partners, Inc.	Occupation Principal
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. SEIU Local 509 PAC</b>		Date of Receipt MM / DD / YYYY 09 / 18 / 2013 <b>Transaction ID : SA11AI.4224</b>
Mailing Address 100 Talcott Avenue		Amount of Each Receipt this Period 5000.00
City Watertown	State MA	Zip Code 02472
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>c. Sprinkler Fitters Local 550</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : SA11AI.4201</b>
Mailing Address 46 Rockland Street		Amount of Each Receipt this Period 5000.00
City Boston	State MA	Zip Code 02132
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 13 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial) <b>A. Thornton &amp; Naumes, LLP</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 07 / 2013
Mailing Address 100 Summer Street 30th Floor		<b>Transaction ID : SA11AI.4233</b>
City Boston	State MA	Zip Code 02110
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 10000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) <b>B. United Association of Journeymen and Pipefitters</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 28 / 2013
Mailing Address 3 Park Place		<b>Transaction ID : SA11AI.4171</b>
City Annapolis	State MD	Zip Code 21401
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100000.00	

Full Name (Last, First, Middle Initial) <b>C. United Association of Journeymen and Pipefitters</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2013
Mailing Address 3 Park Place		<b>Transaction ID : SA11AI.4259</b>
City Annapolis	State MD	Zip Code 21401
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	210000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 46  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)  
**A. United Steel Workers**

Mailing Address 5 Gateway Center

City State Zip Code  
Pittsburgh PA 15222

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
40000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2013  
**Transaction ID : SA11AI.4278**

Amount of Each Receipt this Period  
40000.00

Full Name (Last, First, Middle Initial)  
**B. Wayne Roofing Systems LLC**

Mailing Address 65 E Belcher Road

City State Zip Code  
Foxborough MA 02035

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2013  
**Transaction ID : SA11AI.4265**

Amount of Each Receipt this Period  
50000.00

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	862000.00

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

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

FOR LINE NUMBER: PAGE 15 OF 46  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)  
**A. AMALGAMATED TRANSIT UNION - COPE**

Mailing Address 5025 WISCONSIN AVE NW

City State Zip Code  
WASHINGTON DC 20016

FEC ID number of contributing federal political committee. **C** C00032995

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2013  
**Transaction ID : SA11C.4199**

Amount of Each Receipt this Period  
20000.00

Full Name (Last, First, Middle Initial)  
**B. D.R.I.V.E. - DEMOCRAT, REPUBLICAN, INDEPENDENT VOTER EDUCATION (THE PAC OF THE INTERNATION**

Mailing Address 25 LOUISIANA AVE., NW

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
14999.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2013  
**Transaction ID : SA11C.4213**

Amount of Each Receipt this Period  
14999.00

Full Name (Last, First, Middle Initial)  
**C. D.R.I.V.E. - DEMOCRAT, REPUBLICAN, INDEPENDENT VOTER EDUCATION (THE PAC OF THE INTERNATION**

Mailing Address 25 LOUISIANA AVE., NW

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
29998.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2013  
**Transaction ID : SA11C.4291**

Amount of Each Receipt this Period  
14999.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 49998.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 46  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

**A.** Full Name (Last, First, Middle Initial)  
ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST, NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
75000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2013

**Transaction ID : SA11C.4229**

Amount of Each Receipt this Period  
75000.00

**B.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL COMM

Mailing Address 7234 PARKWAY DRIVE

City HANOVER State MD Zip Code 21076

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2013

**Transaction ID : SA11C.4186**

Amount of Each Receipt this Period  
50000.00

**C.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL COMM

Mailing Address 7234 PARKWAY DRIVE

City HANOVER State MD Zip Code 21076

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2013

**Transaction ID : SA11C.4231**

Amount of Each Receipt this Period  
50000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 175000.00

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



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

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

FOR LINE NUMBER: PAGE 17 OF 46  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)  
**A. INTL UNION OF BRICKLAYERS & ALLIED CRAFTWORKERS PAC**

Mailing Address 620 F STREET, NW  
SUITE 900

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00003632

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2013  
**Transaction ID : SA11C.4195**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. INTL UNION OF BRICKLAYERS & ALLIED CRAFTWORKERS PAC**

Mailing Address 620 F STREET, NW  
SUITE 900

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00003632

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2013  
**Transaction ID : SA11C.4296**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. NINETY NINE PERCENT; THE**

Mailing Address PO BOX 27892

City WASHINGTON State DC Zip Code 20038

FEC ID number of contributing federal political committee. **C** C00543140

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 27 / 2013  
**Transaction ID : SA11C.4169**

Amount of Each Receipt this Period  
25000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 18 OF 46
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

**A.** Full Name (Last, First, Middle Initial)  
SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE

Mailing Address 1750 NEW YORK AVENUE, NW

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2013

**Transaction ID : SA11C.4179**

Amount of Each Receipt this Period  
25000.00

**B.** Full Name (Last, First, Middle Initial)  
SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE

Mailing Address 1750 NEW YORK AVENUE, NW

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
40000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2013

**Transaction ID : SA11C.4287**

Amount of Each Receipt this Period  
15000.00

**C.** Full Name (Last, First, Middle Initial)  
UNITED FOOD AND COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Mailing Address 1775 K STREET N.W.

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00002766

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2013

**Transaction ID : SA11C.4289**

Amount of Each Receipt this Period  
50000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 19 OF 46  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

**A. WORKING FOR WORKING AMERICANS - FEDERAL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6801 PLACID STREET  
 City LAS VEGAS State NV Zip Code 89119  
 FEC ID number of contributing federal political committee. **C** C00490847  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 25000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2013  
**Transaction ID : SA11C.4284**  
 Amount of Each Receipt this Period  
 25000.00

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	374998.00

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

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

FOR LINE NUMBER: PAGE 20 OF 46  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)  
**A. American Working Families Action Fund**

Mailing Address 107 South West Street

City Washington State DC Zip Code 22314

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2013  
**Transaction ID : SA17.4193**

Amount of Each Receipt this Period  
1000.00

Data Purchase

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 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 Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00

**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)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
09		11		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4147**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

35.00
-------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
09		13		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4205**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

20.00
-------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
09		13		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4206**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

20.00
-------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

75.00
-------

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

--

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
09		16		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4215**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

20.00
-------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
09		16		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4216**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

12.00
-------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
09		18		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4221**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

20.00
-------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

52.00
-------

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

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**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)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
09		19		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4148**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

54.99
-------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4149**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

15.00
-------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
10		08		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4236**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

20.00
-------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

54.99
-------

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

54.99
-------

**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)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
10		08		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4237**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

12.00
-------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
10		09		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4238**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

20.00
-------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
10		10		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4150**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

35.00
-------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

67.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**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)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Mailing Address 600 North Washington Street

**Transaction ID : SB21B.4239**

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

20.00
-------

Purpose of Disbursement  
Bank Charges

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2013

Mailing Address 600 North Washington Street

**Transaction ID : SB21B.4240**

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

12.00
-------

Purpose of Disbursement  
Bank Charges

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2013

Mailing Address 600 North Washington Street

**Transaction ID : SB21B.4241**

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

20.00
-------

Purpose of Disbursement  
Bank Charges

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

52.00
-------

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

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**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)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
10		21		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4242**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

20.00
-------

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
10		21		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4243**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

20.00
-------

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
10		21		2013

City Alexandria State VA Zip Code 22314

**Transaction ID : SB21B.4308**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

12.00
-------

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

52.00
-------

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

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**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)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 22 / 2013

Transaction ID : SB21B.4244

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 24 / 2013

Transaction ID : SB21B.4245

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 25 / 2013

Transaction ID : SB21B.4246

Amount of Each Disbursement this Period

12.00

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

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

52.00

**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)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
10		28		2013

City	State	Zip Code
Alexandria	VA	22314

**Transaction ID : SB21B.4247**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

12.00
-------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
10		29		2013

City	State	Zip Code
Alexandria	VA	22314

**Transaction ID : SB21B.4248**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

20.00
-------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
10		29		2013

City	State	Zip Code
Alexandria	VA	22314

**Transaction ID : SB21B.4249**

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

12.00
-------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

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

44.00
-------

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

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# 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)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

### A. Bank of America

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
10		30		2013

City	State	Zip Code
Alexandria	VA	22314

Transaction ID : SB21B.4250

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

35.00
-------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

### B. Bank of America

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
10		31		2013

City	State	Zip Code
Alexandria	VA	22314

Transaction ID : SB21B.4151

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

15.00
-------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

### C. Bank of America

Date of Disbursement

Mailing Address 600 North Washington Street

M M M	/	D D D	/	Y Y Y Y Y
10		31		2013

City	State	Zip Code
Alexandria	VA	22314

Transaction ID : SB21B.4251

Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

20.00
-------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

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

70.00
-------

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

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**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)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2013

**Transaction ID : SB21B.4252**

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2013

**Transaction ID : SB21B.4253**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2013

**Transaction ID : SB21B.4254**

Amount of Each Disbursement this Period

20.00

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

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

52.00

**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)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Bank Charges

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 / 02 / 2013

Transaction ID : SB21B.4152

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**B. PowerThru Consulting, LLC**

Mailing Address 1740 Hinesburg Rd.

City Richmond State VT Zip Code 05477

Purpose of Disbursement  
Web Design

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  
09 / 10 / 2013

Transaction ID : SB21B.4145

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Revolution Media**

Mailing Address 1343 Massachusetts Ave, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Media 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  
08 / 24 / 2013

Transaction ID : SB21B.4165

Amount of Each Disbursement this Period

5000.00

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

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

5515.00

**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)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Sandler, Reiff, Young & Lamb, PC**

Mailing Address 1025 Vermont Ave., NW  
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2013

**Transaction ID : SB21B.4306**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Spark, LLC**

Mailing Address 68 Deering Street, Suite 2

City Portland State ME Zip Code 04101

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 21 / 2013

**Transaction ID : SB21B.4157**

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**C. Spark, LLC**

Mailing Address 68 Deering Street, Suite 2

City Portland State ME Zip Code 04101

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 24 / 2013

**Transaction ID : SB21B.4167**

Amount of Each Disbursement this Period

15000.00

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

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

35000.00



**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)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Spark, LLC**

Mailing Address 68 Deering Street, Suite 2

City Portland State ME Zip Code 04101

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 10 / 2013

**Transaction ID : SB21B.4235**

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**B. Spark, LLC**

Mailing Address 68 Deering Street, Suite 2

City Portland State ME Zip Code 04101

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 08 / 2013

**Transaction ID : SB21B.4298**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

25000.00

66085.99

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bay State News Service**

Mailing Address 77 Pond Ave

City Brookline State MA Zip Code 02445

Purpose of Disbursement  
Research - Non-Federal Election

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  
08 / 24 / 2013

Transaction ID : SB29.4161

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Bay State News Service**

Mailing Address 77 Pond Ave

City Brookline State MA Zip Code 02445

Purpose of Disbursement  
Research - Non-Federal Election

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 10 / 2013

Transaction ID : SB29.4228

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Extreme Reach**

Mailing Address 75 Second Hill Avenue

City Brookline State MA Zip Code 02445

Purpose of Disbursement  
TV Spot Delivery - Non-Federal Election

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 / 11 / 2013

Transaction ID : SB29.4301

Amount of Each Disbursement this Period

5000.00

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

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

15000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Factotum Productions**

Mailing Address 95 North Main Street

City Westford State MA Zip Code 01886

Purpose of Disbursement  
Polling - Non-Federal Election

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 10 / 2013

Transaction ID : **SB29.4226**

Amount of Each Disbursement this Period

24000.00

Full Name (Last, First, Middle Initial)

**B. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
08 / 29 / 2013

Transaction ID : **SB29.4175**

Amount of Each Disbursement this Period

165000.00

Full Name (Last, First, Middle Initial)

**C. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 05 / 2013

Transaction ID : **SB29.4185**

Amount of Each Disbursement this Period

55000.00

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

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

244000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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  
09 / 09 / 2013

Transaction ID : SB29.4190

Amount of Each Disbursement this Period

51000.00

Full Name (Last, First, Middle Initial)

**B. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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  
09 / 16 / 2013

Transaction ID : SB29.4207

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**C. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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  
09 / 16 / 2013

Transaction ID : SB29.4208

Amount of Each Disbursement this Period

5000.00

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

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

66000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 16 / 2013

**Transaction ID : SB29.4209**

Amount of Each Disbursement this Period

20000.00

**B. Fortune Media**

Full Name (Last, First, Middle Initial)

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 16 / 2013

**Transaction ID : SB29.4210**

Amount of Each Disbursement this Period

22000.00

**C. Fortune Media**

Full Name (Last, First, Middle Initial)

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 16 / 2013

**Transaction ID : SB29.4211**

Amount of Each Disbursement this Period

14000.00

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

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

56000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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  
09 / 17 / 2013

Transaction ID : SB29.4223

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**B. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 08 / 2013

Transaction ID : SB29.4255

Amount of Each Disbursement this Period

80000.00

Full Name (Last, First, Middle Initial)

**C. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 09 / 2013

Transaction ID : SB29.4257

Amount of Each Disbursement this Period

30000.00

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

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

125000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 11 / 2013

Transaction ID : SB29.4260

Amount of Each Disbursement this Period

108000.00

Full Name (Last, First, Middle Initial)

**B. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 18 / 2013

Transaction ID : SB29.4274

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**C. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 21 / 2013

Transaction ID : SB29.4275

Amount of Each Disbursement this Period

210000.00

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

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

333000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 22 / 2013

Transaction ID : SB29.4276

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

**B. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 24 / 2013

Transaction ID : SB29.4277

Amount of Each Disbursement this Period

40000.00

Full Name (Last, First, Middle Initial)

**C. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 30 / 2013

Transaction ID : SB29.4288

Amount of Each Disbursement this Period

85000.00

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

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

145000.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2013

Transaction ID : SB29.4292

Amount of Each Disbursement this Period

40000.00

Full Name (Last, First, Middle Initial)

**B. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2013

Transaction ID : SB29.4293

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**C. Fortune Media**

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2013

Transaction ID : SB29.4294

Amount of Each Disbursement this Period

5000.00

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

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

55000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Jackson Group Media, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		06		2013

Mailing Address 206 North Washington Street  
Suite 10

**Transaction ID : SB29.4191**

City Alexandria State VA Zip Code 22311

Amount of Each Disbursement this Period

25000.00
----------

Purpose of Disbursement  
Video Production - Non-Federal Election

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Jackson Group Media, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		16		2013

Mailing Address 206 North Washington Street  
Suite 10

**Transaction ID : SB29.4212**

City Alexandria State VA Zip Code 22311

Amount of Each Disbursement this Period

7500.00
---------

Purpose of Disbursement  
Video Production - Non-Federal Election

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Jackson Group Media, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2013

Mailing Address 206 North Washington Street  
Suite 10

**Transaction ID : SB29.4232**

City Alexandria State VA Zip Code 22311

Amount of Each Disbursement this Period

7500.00
---------

Purpose of Disbursement  
Video Production - Non-Federal Election

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

40000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Jackson Group Media, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2013

Mailing Address 206 North Washington Street  
Suite 10

**Transaction ID : SB29.4269**

City Alexandria State VA Zip Code 22311

Amount of Each Disbursement this Period

40000.00
----------

Purpose of Disbursement  
Video Production - Non-Federal Election

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Jackson Group Media, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2013

Mailing Address 206 North Washington Street  
Suite 10

**Transaction ID : SB29.4283**

City Alexandria State VA Zip Code 22311

Amount of Each Disbursement this Period

7500.00
---------

Purpose of Disbursement  
Video Production - Non-Federal Election

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Lake Research**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		11		2013

Mailing Address 1726 M Street, NW  
Suite 1100

**Transaction ID : SB29.4304**

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

1078.39
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Purpose of Disbursement  
Travel - Non-Federal Election

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Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

48578.39
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Moody Street Pictures**

Mailing Address 282 Moody Street  
3rd Floor

City Waltham State MA Zip Code 02453

Purpose of Disbursement  
Video Production - Non-Federal Election

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  
08 / 23 / 2013

Transaction ID : **SB29.4159**

Amount of Each Disbursement this Period

10200.00

Full Name (Last, First, Middle Initial)

**B. Moody Street Pictures**

Mailing Address 282 Moody Street  
3rd Floor

City Waltham State MA Zip Code 02453

Purpose of Disbursement  
Video Production - Non-Federal Election

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  
09 / 23 / 2013

Transaction ID : **SB29.4222**

Amount of Each Disbursement this Period

2200.00

Full Name (Last, First, Middle Initial)

**C. Moody Street Pictures**

Mailing Address 282 Moody Street  
3rd Floor

City Waltham State MA Zip Code 02453

Purpose of Disbursement  
Video Production - Non-Federal Election

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 15 / 2013

Transaction ID : **SB29.4263**

Amount of Each Disbursement this Period

3000.00

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

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

15400.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Precision Networks**

Mailing Address 1140 Connecticut Ave, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement Advertising - Non-Federal Election

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /   
10 / 14 / 2013

Transaction ID : SB29.4261

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

**B. Public Policy Polling**

Mailing Address 2912 Highwoods Blvd

City Raleigh State NC Zip Code 27604

Purpose of Disbursement Polling - Non-Federal Election

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /   
11 / 27 / 2013

Transaction ID : SB29.4299

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. Public Policy Polling**

Mailing Address 2912 Highwoods Blvd

City Raleigh State NC Zip Code 27604

Purpose of Disbursement Polling - Non-Federal Election

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /   
12 / 10 / 2013

Transaction ID : SB29.4303

Amount of Each Disbursement this Period

2000.00

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

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

25000.00

1167978.39

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

**LOANS**

NAME OF COMMITTEE (In Full) **AMERICAN WORKING FAMILIES** Transaction ID : **SC/10.4113**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Jackson Group Media, LLC	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 206 North Washington Street Suite 10	
City Alexandria State VA ZIP Code 22311	

Original Amount of Loan 3000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3000.00
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**TERMS**

Date Incurred MM / DD / YYYY 06 / 01 / 2012	Date Due MM / DD / YYYY None	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	3000.00
<b>TOTALS</b> This Period (last page in this line only)..... ▶	3000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.