

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.

CAMPAIGN FOR 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:
- | | | | |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input checked="" type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> 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 Dorie Velezis

Signature of Treasurer Dorie Velezis [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.

Office Use Only									
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FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CAMPAIGN FOR 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="2016"/>	<input type="text" value="359098.56"/>	<input type="text" value="359098.56"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="341907.35"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="17708.54"/>	<input type="text" value="77727.98"/>
(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="359615.89"/>	<input type="text" value="436826.54"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="17769.80"/>	<input type="text" value="94980.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="341846.09"/>	<input type="text" value="341846.09"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="9044.90"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2016 To: M M / D D / Y Y Y Y 04 / 30 / 2016

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).....	10227.01	34091.01
(ii) Unitemized	7472.70	30922.86
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	17699.71	65013.87
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	17699.71	65013.87
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.).....	8.83	12714.11
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))..... ▶	17708.54	77727.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	17708.54	77727.98

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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	17769.80	90980.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	17769.80	90980.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	4000.00
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	0.00	0.00
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)) ..	17769.80	94980.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17769.80	94980.45

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)	17699.71	65013.87
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17699.71	65013.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	17769.80	90980.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	17769.80	90980.45

**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 6 OF 39
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR CHARLES D AYRES
 Full Name (Last, First, Middle Initial)
 Mailing Address 4911 CASA ORO DR
 City YORBA LINDA State CA Zip Code 92886
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2016
Transaction ID : SA11AI.17911
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CAROL BOECKEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 6260 COUNTY RD 17
 City BEULAH State ND Zip Code 58523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation SELF
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2016
Transaction ID : SA11AI.17810
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. MR RONALD J BOOMSTRA
 Full Name (Last, First, Middle Initial)
 Mailing Address 585 BIRCHWOOD ST
 City JACKSON State MI Zip Code 49203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED MILITARY
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 07 / 2016
Transaction ID : SA11AI.17784
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17911

0103804-0000212

Form/Schedule: SA11AI

Transaction ID: SA11AI.17810

0111977-0000115

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17784

0025974-0000092

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MRS MICHELE CHAPDELAINE
 Full Name (Last, First, Middle Initial)
 Mailing Address 990 SWEET GRASS CIR
 City State Zip Code
 AURORA OH 44202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PIONEER PRE-SCHOOL TEACHER
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2016
Transaction ID : SA11AI.17771
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

B. KATHLEEN ECHELBARGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 620 SUNSET AVE N
 City State Zip Code
 EDMONDS WA 98020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF HOMEMAKER
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2016
Transaction ID : SA11AI.17932
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. MR CRAIG W EGLOFF
 Full Name (Last, First, Middle Initial)
 Mailing Address 27001 HIGHWAY 128
 City State Zip Code
 YORKVILLE CA 95494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 JAYMES & JAYMES INSURANCE BROKER
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2016
Transaction ID : SA11AI.17925
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2550.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17771

0009640-0000079

Form/Schedule: SA11AI

Transaction ID: SA11AI.17932

0111888-0000232

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17925

0101847-0000224

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR JAMES FULLMER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2552 WALNUT AVE STE 230
 City TUSTIN State CA Zip Code 92780
 FEC ID number of contributing federal political committee. C
 Name of Employer SELF Occupation REAL ESTATE
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2016
Transaction ID : SA11Al.17909
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. MR ALAN HOKANSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 152 GRANDE VISTA WAY
 City CHELSEA State AL Zip Code 35043
 FEC ID number of contributing federal political committee. C
 Name of Employer MYSELF Occupation RETIRED
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2016
Transaction ID : SA11Al.17746
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. MR MARK A HOLMES
 Full Name (Last, First, Middle Initial)
 Mailing Address 6035 S VIVIAN ST
 City LITTLETON State CO Zip Code 80127
 FEC ID number of contributing federal political committee. C
 Name of Employer TERUMO BCT Occupation QUALITY
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2016
Transaction ID : SA11Al.17871
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17909

0106483-0000209

Form/Schedule: SA11AI

Transaction ID: SA11AI.17746

0105332-0000053

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.17871

0008108-0000172

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 15 OF 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR JAMES J KAZMIERZAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 11808 EAGLE VIEW CT
 City State Zip Code
 FORT WAYNE IN 46814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF SALES
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 488.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2016
Transaction ID : SA11AI.17776
 Amount of Each Receipt this Period
 122.00
 Memo Item
 CONTRIBUTION

B. MR THOMAS J KUK
 Full Name (Last, First, Middle Initial)
 Mailing Address 32265 WEEPING WILLOW ST
 City State Zip Code
 TRABUCO CANYON CA 92679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2016
Transaction ID : SA11AI.17907
 Amount of Each Receipt this Period
 55.00
 Memo Item
 CONTRIBUTION

C. GARY MAGELSSSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 18300 JACKS HILL RD
 City State Zip Code
 TEHACHAPI CA 93561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2016
Transaction ID : SA11AI.17918
 Amount of Each Receipt this Period
 225.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 402.00
TOTAL This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17776

0111250-0000085

Form/Schedule: SA11AI

Transaction ID: SA11AI.17907

0015893-0000206

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17918

0111985-0000218

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. JOCELYN MANULLANG
 Full Name (Last, First, Middle Initial)
 Mailing Address 8303 121ST AVE SE
 City NEWCASTLE State WA Zip Code 98056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER/HOMESCHOOLING PARENT
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2016
Transaction ID : SA11AI.17934
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MR DON P MORGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 WILD TURKEY LN
 City LITTLETON State CO Zip Code 80127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FDSC- INC. Occupation SALESMAN
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2016
Transaction ID : SA11AI.17872
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DR DAVID MORRISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1802 CROOM DR
 City MONTGOMERY State AL Zip Code 36106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation SELF
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2016
Transaction ID : SA11AI.17751
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17934

0107670-0000235

Form/Schedule: SA11AI

Transaction ID: SA11AI.17872

0008111-0000174

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.17751

0003940-0000059

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. NICK PAPAGEORGES
Full Name (Last, First, Middle Initial)

Mailing Address 25701 TALADRO CIR STE F

City MISSION VIEJO State CA Zip Code 92691

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

Name of Employer SADDLEBACK CARS Occupation AUTO SHOP OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 29 / 2016
Transaction ID : SA11AI.17908

Amount of Each Receipt this Period 250.00

Memo Item
CONTRIBUTION

B. MR DAVID G POPE
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 8823

City HORSESHOE BAY State TX Zip Code 78657

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

Name of Employer RETIRED CPA Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2016
Transaction ID : SA11AI.17868

Amount of Each Receipt this Period 100.00

Memo Item
CONTRIBUTION

C. MR MIKE D RISINGER
Full Name (Last, First, Middle Initial)

Mailing Address 421 E GREENWOOD ST

City MORTON State IL Zip Code 61550

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

Name of Employer STATE OF IL Occupation JUDGE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 04 / 25 / 2016
Transaction ID : SA11AI.17819

Amount of Each Receipt this Period 800.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17908

0111026-0000207

Form/Schedule: SA11AI

Transaction ID: SA11AI.17868

0105049-0000169

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17819

0103251-0000123

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

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

Mailing Address 3061 E ARM RD

City ELY State MN Zip Code 55731

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

Name of Employer SELF Occupation DENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **04 / 01 / 2016**

Transaction ID : SA11Al.17804

Amount of Each Receipt this Period **500.00**

Memo Item
CONTRIBUTION

B. MR RICK B SKINNER
Full Name (Last, First, Middle Initial)

Mailing Address 19111 SCENIC HIGHWAY 98

City FAIRHOPE State AL Zip Code 36532

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

Name of Employer N/A Occupation RETIRED ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.04**

Date of Receipt **04 / 15 / 2016**

Transaction ID : SA11Al.17755

Amount of Each Receipt this Period **50.01**

Memo Item
CONTRIBUTION

C. MR RICK B SKINNER
Full Name (Last, First, Middle Initial)

Mailing Address 19111 SCENIC HIGHWAY 98

City FAIRHOPE State AL Zip Code 36532

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

Name of Employer N/A Occupation RETIRED ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.04**

Date of Receipt **04 / 28 / 2016**

Transaction ID : SA11Al.17754

Amount of Each Receipt this Period **50.00**

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **600.01**

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17804

0079539-0000109

Form/Schedule: SA11AI

Transaction ID: SA11AI.17755

0111973-0000064

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17754

0012916-0000063

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR FRED T STIMPSON
Full Name (Last, First, Middle Initial)

Mailing Address 15 HILLWOOD RD

City MOBILE	State AL	Zip Code 36608
----------------	-------------	-------------------

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

Name of Employer SCOTCH GULF LUMBER	Occupation PRESIDENT
--	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : SA11Al.17757

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

Mailing Address 15401 N 45TH PL

City PHOENIX	State AZ	Zip Code 85032
-----------------	-------------	-------------------

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

Name of Employer SELF	Occupation FINANCIAL PLANNER
--------------------------	---------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		07		2016

Transaction ID : SA11Al.17888

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MR RANDALL STOLTZ
Full Name (Last, First, Middle Initial)

Mailing Address 15401 N 45TH PL

City PHOENIX	State AZ	Zip Code 85032
-----------------	-------------	-------------------

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

Name of Employer SELF	Occupation FINANCIAL PLANNER
--------------------------	---------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2016

Transaction ID : SA11Al.17889

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17757

0101392-0000066

Form/Schedule: SA11AI

Transaction ID: SA11AI.17888

0108191-0000186

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17889

0108191-0000187

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 39
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. MR CLIFFORD F TRACY
 Full Name (Last, First, Middle Initial)
 Mailing Address 19361 BROOKHURST ST SPC 148
 City HUNTINGTON BEACH State CA Zip Code 92646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2016
Transaction ID : SA11AI.17906
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. MR JIM M WEISERT
 Full Name (Last, First, Middle Initial)
 Mailing Address 6535 E SANTA AURELIA
 City TUCSON State AZ Zip Code 85715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROVIDENCE THREE Occupation SELF EMPLOYEED
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2016
Transaction ID : SA11AI.17892
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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 M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	10227.01

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.17906

0100452-0000204

Form/Schedule: SA11AI

Transaction ID: SA11AI.17892

0104406-0000190

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. 1st VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.17944**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN VALUES

Mailing Address 2800 S SHIRLINGTON RD #950

City State Zip Code
ARLINGTON VA 22206

Purpose of Disbursement
RENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.17953**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. GARY BAUER

Mailing Address 2800 S SHIRLINGTON RD #930

City State Zip Code
ARLINGTON VA 22206

Purpose of Disbursement
PAC CONSULTING POLITICAL AND ADMIN

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.17956**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. BB&T

Full Name (Last, First, Middle Initial)

Mailing Address 2800 S Quincy St.

City Arlington State VA Zip Code 22206

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 15 / 2016

Transaction ID : **SB21B.17947**

Amount of Each Disbursement this Period: 795.08

Memo Item

B. BB&T

Full Name (Last, First, Middle Initial)

Mailing Address 2800 S Quincy St.

City Arlington State VA Zip Code 22206

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 21 / 2016

Transaction ID : **SB21B.17941**

Amount of Each Disbursement this Period: 143.50

Memo Item

C. CASTLE STRATEGIES

Full Name (Last, First, Middle Initial)

Mailing Address 11105 HARROWFIELD ROAD

City CHARLOTTE State NC Zip Code 28226

Purpose of Disbursement PAC SOCIAL MEDIA CONSULTING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 12 / 2016

Transaction ID : **SB21B.17946**

Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3438.58

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. IRON MOUNTAIN

Mailing Address P.O. BOX 27128

City NEW YORK State NY Zip Code 10087

Purpose of Disbursement
STORAGE FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2016

Transaction ID : SB21B.17951

Amount of Each Disbursement this Period

346.84

Memo Item

Full Name (Last, First, Middle Initial)

B. LPS

Mailing Address P.O. BOX 2325

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
PAC DATA PROCESSING SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 27 / 2016

Transaction ID : SB21B.17962

Amount of Each Disbursement this Period

251.39

Memo Item

Full Name (Last, First, Middle Initial)

C. BILL MOELLER

Mailing Address 2800 S SHIRLINGTON RD #930

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
PAC CONSULTING RESEARCHER/WRITER

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 27 / 2016

Transaction ID : SB21B.17954

Amount of Each Disbursement this Period

2250.00

Memo Item

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

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

2848.23

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. Dorie Velezis

Mailing Address 2800 S Shirlington Rd #930

City Arlington State VA Zip Code 22206

Purpose of Disbursement
PAC COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 27 / 2016

Transaction ID : SB21B.17955

Amount of Each Disbursement this Period

2250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. VERIZON

Mailing Address P.O. BOX 17577

City BALTIMORE State MD Zip Code 21297

Purpose of Disbursement
TELEPHONE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 27 / 2016

Transaction ID : SB21B.17958

Amount of Each Disbursement this Period

413.33

Memo Item

Full Name (Last, First, Middle Initial)

C. DEAN VIRAG

Mailing Address 14511 RILLHURST DR

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement
PAC WEBSITE SUPPORT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2016

Transaction ID : SB21B.17948

Amount of Each Disbursement this Period

500.00

Memo Item

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

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

3163.33

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
PAC CAGING AND DATA ENTRY SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2016

Transaction ID : SB21B.17959

Amount of Each Disbursement this Period

584.15

Memo Item

Full Name (Last, First, Middle Initial)

B. WEBSTER CHAMBERLAIN & BEAN

Mailing Address 1747 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

Transaction ID : SB21B.17952

Amount of Each Disbursement this Period

123.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Memo Item

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

707.15

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

17515.13

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 37 OF 39
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AMERICA DIRECT	Nature of Debt (Purpose): PAC DIRECT MAIL PRODUCTION
Mailing Address 1272 CORPORATE PARK DR	
City State Zip Code FOREST VA 24511	

Outstanding Balance Beginning This Period 2955.31	Transaction ID : SD10.4357	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2955.31

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor DIRECTECH	Nature of Debt (Purpose): CAGING AND DATA PROCESSING SERVICES
Mailing Address 8595 GROVEMONT CIRCLE	
City State Zip Code GAITHERSBURG MD 20877	

Outstanding Balance Beginning This Period 223.11	Transaction ID : SD10.4359	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 223.11

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LPS	Nature of Debt (Purpose): PAC DATA PROCESSING SERVICES
Mailing Address P.O. BOX 2325	
City State Zip Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.17961	
Amount Incurred This Period 251.39	Payment This Period 251.39	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	3178.42
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 38 OF 39
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LPS	Nature of Debt (Purpose): PAC DATA PROCESSING SERVICES
Mailing Address P.O. BOX 2325	
City State Zip Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.17963	
Amount Incurred This Period 539.84	Payment This Period 0.00	Outstanding Balance at Close of This Period 539.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MWM DIRECT MARKETING SERVICES	Nature of Debt (Purpose): PAC DIRECT MAIL
Mailing Address 8048 HILLRISE COURT	
City State Zip Code ELKRIDGE MD 21075	

Outstanding Balance Beginning This Period 2320.90	Transaction ID : SD10.4361	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2320.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor STEPHENSON PRINTING INC	Nature of Debt (Purpose): DIRECT MAIL POSTAGE
Mailing Address 5731 GENERAL WASHINGTON DRIVE	
City State Zip Code ALEXANDRIA VA 22312	

Outstanding Balance Beginning This Period 0.30	Transaction ID : SD10.16859	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.30

1) SUBTOTALS This Period This Page (optional)..... ▶	2861.04
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 39 OF 39
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE HARTFORD	Nature of Debt (Purpose): PAC - BUSINESS INSURANCE COSTS
Mailing Address P.O. BOX 660916	
City State Zip Code DALLAS TX 75266	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.17965	
Amount Incurred This Period 2532.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2532.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor WASHINGTON INTELLIGENCE BUREAU	Nature of Debt (Purpose): PAC CAGING AND DATA ENTRY SERVICES
Mailing Address 4128 PEPSI PLACE	
City State Zip Code CHANTILLY VA 20151	

Outstanding Balance Beginning This Period 584.15	Transaction ID : SD10.17686	
Amount Incurred This Period 0.00	Payment This Period 584.15	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor WASHINGTON INTELLIGENCE BUREAU	Nature of Debt (Purpose): PAC CAGING AND DATA PROCESSING SERVICES
Mailing Address 4128 PEPSI PLACE	
City State Zip Code CHANTILLY VA 20151	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.17964	
Amount Incurred This Period 473.44	Payment This Period 0.00	Outstanding Balance at Close of This Period 473.44

1) SUBTOTALS This Period This Page (optional)..... ▶	3005.44
2) TOTALS This Period (last page this line number only)..... ▶	9044.90
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	9044.90