24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) CAMPAIGN FOR WORKING FAMILIES	FEC IDENTIFICATION NUMBER ▼ C C00325076
Check If 24-hour report	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee In Altum Productions Mailing Address 7621 Provincial Dr.	Date 03 / 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code McLean VA 22102	Amount 1050.00 Transaction ID : SE.55332
Purpose of Expenditure PAC Web AD Category/ Type Office Name of Federal Candidate Supported or Opposed by Expenditure:	e Sought: House State: DC Senate District: President
BARACK OBAMA Chec	ck One: Support Oppose ursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 1050.00 2012 Full Name (Last, First, Middle Initial) of Payee	Other (specify)
Mailing Address	Date
City State Zip Code	Amount
Purpose of Expenditure Category/ Type Office	e Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure: Chec	President Oppose
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1050.00
(b) SUBTOTAL of Unitemized Independent Expenditures	1171171171
(c) TOTAL Independent Expenditures	1050.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Dorie Velezis [Electronically Filed] Date Signature	3 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y