

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Campaign for Working Families

ADDRESS (number and street) 2800 Shirlington Road, Suite 930 Check if different than previously reported. (ACC) Arlington VA 22206

2. FEC IDENTIFICATION NUMBER C00325076 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 03 01 2008 through 03 31 2008

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 Amy Myers

Signature of Treasurer Electronically Filed by Amy Myers Date 04 18 2008

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

Table with 7 columns and 1 row for Office Use Only

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Campaign for Working Families

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		1339727.01
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	1361097.14									
(c) Total Receipts (from Line 19)	64741.66	152071.73								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1425838.80	1491798.74								
7. Total Disbursements (from Line 31)	46835.95	112795.89								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1379002.85	1379002.85								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	2544.01									

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
Campaign for Working Families

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	48650.00	98310.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	15156.93	49358.11
(iii) TOTAL (add Lines 11(a)(i) and (ii)	63806.93	147668.11
(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)	63806.93	147668.11
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	234.83
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	934.73	4168.79
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 Transfer (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))	64741.66	152071.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	64741.66	152071.73

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) Shared 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.....	44835.95	110695.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	44835.95	110695.89
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	2000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	100.00
(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	100.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	46835.95	112795.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46835.95	112795.89

DETAILED SUMMARY PAGE
of Disbursements

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)	63806.93	147668.11
34. Total Contribution Refunds (from Line 28(d))	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	63806.93	147568.11
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	44835.95	110695.89
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	234.83
38. Net Operating Expenditures (subtract Line 37 from Line 36)	44835.95	110461.06

**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 / 53
	<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	

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

NAME OF COMMITTEE (In Full)
Campaign for Working Families

A.

Full Name (Last, First, Middle Initial) MR CHRIS AYERS		Date of Receipt
Mailing Address 828 OLNEY OAK DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code HOUSTON TX 77079		<input type="text"/> 03 / <input type="text"/> 21 / <input type="text"/> 2008
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.85300
Name of Employer Occupation CONOCO INDONESIA MANAGE ECONOMICS & PLANNING		Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 300.00
Aggregate Year-to-Date ▼		<input type="text"/> 300.00

B.

Full Name (Last, First, Middle Initial) MR CHARLES D AYRES		Date of Receipt
Mailing Address 4911 CASA ORO DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code YORBA LINDA CA 92886		<input type="text"/> 03 / <input type="text"/> 11 / <input type="text"/> 2008
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.85406
Name of Employer Occupation RETIRED RETIRED		Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 100.00
Aggregate Year-to-Date ▼		<input type="text"/> 300.00

C.

Full Name (Last, First, Middle Initial) DONALD C BISHOP		Date of Receipt
Mailing Address 15916 LA LINDURA DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code WHITTIER CA 90603		<input type="text"/> 03 / <input type="text"/> 11 / <input type="text"/> 2008
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.85370
Name of Employer Occupation RETIRED RETIRED		Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 250.00
Aggregate Year-to-Date ▼		<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 650.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 7 / 53
	<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.

Full Name (Last, First, Middle Initial)
MR DEL C BROOKS

Mailing Address 12789 MUIRFIELD BLVD N

City JACKSONVILLE State FL Zip Code 32225

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

Name of Employer SMURFIT STORE CONT. CORP Occupation GEN MGR

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 13 / 2008
Transaction ID: SA11AI.85086
 Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
MR DEL C BROOKS

Mailing Address 12789 MUIRFIELD BLVD N

City JACKSONVILLE State FL Zip Code 32225

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

Name of Employer SMURFIT STORE CONT. CORP Occupation GEN MGR

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 31 / 2008
Transaction ID: SA11AI.85087
 Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
WILLIAM P BUCK, JR

Mailing Address 2084 BROOK HIGHLAND RDG

City BIRMINGHAM State AL Zip Code 35242

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

Name of Employer INFO REQUESTED- NOT RECD Occupation INFO REQUESTED- NOT RECD

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 20 / 2008
Transaction ID: SA11AI.85116
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 300.00

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 / 53
(check only one)

<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.

Full Name (Last, First, Middle Initial)
MS SHIRLEY BURT

Mailing Address PO BOX 5

City PLEASANT VLY State IA Zip Code 52767

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

Name of Employer SELF Occupation HOMEMAKER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 04 / 2008
Transaction ID: SA11AI.85202
Amount of Each Receipt this Period: 300.00

B.

Full Name (Last, First, Middle Initial)
MR GORDON CHAN

Mailing Address 1023 NE 98TH ST

City SEATTLE State WA Zip Code 98115

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

Name of Employer NORTHWEST HOSP Occupation C. T. TECHNOLOGIST

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 05 / 2008
Transaction ID: SA11AI.85464
Amount of Each Receipt this Period: 50.00

C.

Full Name (Last, First, Middle Initial)
MR CRAIG W EGLOFF

Mailing Address 27001 HWY 128

City YORKVILLE State CA Zip Code 95494

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

Name of Employer JAYMES & JAYMES Occupation INSURANCE BROKER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1700.00

Date of Receipt: 03 / 31 / 2008
Transaction ID: SA11AI.85426
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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 / 53
(check only one)

<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.

Full Name (Last, First, Middle Initial)
KAREN A FERGUSON

Mailing Address 15514 NE 86TH ST

City State Zip Code
VANCOUVER WA 98682

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

Name of Employer Occupation
INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2008

Transaction ID: SA11AI.85481

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
AARON FLEMING

Mailing Address 1801 FAIRFOREST DR

City State Zip Code
MONTGOMERY AL 36106

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

Name of Employer Occupation
EASTWOOD PRESBYTERIAN CHURCH MONTGOMERY PASTOR

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 11 / 2008

Transaction ID: SA11AI.85119

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
DR JERRE M FREEMAN

Mailing Address 6485 POPLAR AVE

City State Zip Code
MEMPHIS TN 38119

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

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 04 / 2008

Transaction ID: SA11AI.85136

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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 10 / 53
	<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.

Full Name (Last, First, Middle Initial) MRS SUSAN R GORDON		Date of Receipt
Mailing Address 1212 NW 12TH ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code ANDREWS TX 79714		<input type="text"/> 03 / <input type="text"/> 10 / <input type="text"/> 2008
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.85324
Name of Employer Occupation BRIAN E GORDON- MD BOOKKEEPER		Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 250.00
Aggregate Year-to-Date ▼		<input type="text"/> 250.00

B.

Full Name (Last, First, Middle Initial) MR GARY HANSEN		Date of Receipt
Mailing Address 1604 NORTH HWY 14		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code AURORA NE 68818		<input type="text"/> 03 / <input type="text"/> 20 / <input type="text"/> 2008
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.85266
Name of Employer Occupation SELF INTERNET RETAIL		Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 300.00
Aggregate Year-to-Date ▼		<input type="text"/> 300.00

C.

Full Name (Last, First, Middle Initial) MR GREGG P HEALEY		Date of Receipt
Mailing Address 61 E MEADOW RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code WILTON CT 06897		<input type="text"/> 03 / <input type="text"/> 20 / <input type="text"/> 2008
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.84991
Name of Employer Occupation SELF INVESTMENTS		Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 300.00
Aggregate Year-to-Date ▼		<input type="text"/> 300.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 850.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 53
(check only one)

<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.

Full Name (Last, First, Middle Initial)
MRS SYLVIA HOLLINGER

Mailing Address 26 HOLLOW RD

City State Zip Code
NEW PROVIDENCE PA 17560

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

Name of Employer Occupation
WDAC RADIO COMPANY ADMINISTRATIVE ASSISTANT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2008

Transaction ID: SA11AI.85013

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
MR FLOYD R JUMP

Mailing Address 350 E HENSCHEN ST

City State Zip Code
GARNER IA 50438

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

Name of Employer Occupation
F AN D A JUMP TRUSTEES RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2008

Transaction ID: SA11AI.85199

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MR JOHN S KIRKPATRICK

Mailing Address 13874 BELLA RIVA LN

City State Zip Code
JACKSONVILLE FL 32225

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

Name of Employer Occupation
UNIV OF ALABAMA BIRMINGHAM TEACHER/SURGEON

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: SA11AI.85088

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

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: <input 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	PAGE 12 / 53
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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A.	Full Name (Last, First, Middle Initial) MRS SHERRILL A LARSON		Date of Receipt MM / DD / YYYY 03 / 18 / 2008		
	Mailing Address 13510 BRAEMAR DR		Transaction ID: SA11AI.85205		
	City ELM GROVE	State WI	Zip Code 53122	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MED COLLEGE OF NI	Occupation PHYSICIAN			

Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

B.	Full Name (Last, First, Middle Initial) MS JANET E LEVY		Date of Receipt MM / DD / YYYY 03 / 11 / 2008		
	Mailing Address 1142 SOMERA RD		Transaction ID: SA11AI.85368		
	City LOS ANGELES	State CA	Zip Code 90077	Amount of Each Receipt this Period 5000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer SELF EMPLOYED	Occupation POLITICAL ACTIVIST			

Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00
---	-------------------------------------

C.	Full Name (Last, First, Middle Initial) MRS STACY LINDAUER		Date of Receipt MM / DD / YYYY 03 / 11 / 2008		
	Mailing Address 762 W 8TH ST		Transaction ID: SA11AI.85164		
	City JASPER	State IN	Zip Code 47546	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer SALVAGE CORP	Occupation BUSINESS OWNER			

Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

SUBTOTAL of Receipts This Page (optional)	5500.00
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 13 / 53
	<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.

Full Name (Last, First, Middle Initial) MS RUTH A MERILLAT		Date of Receipt MM / DD / YYYY 03 / 06 / 2008
Mailing Address 860 RICHLYN DR		Transaction ID: SA11AI.85185
City ADRIAN	State MI	Zip Code 49221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.

Full Name (Last, First, Middle Initial) MR WILLIAM T MILLS, III		Date of Receipt MM / DD / YYYY 03 / 04 / 2008
Mailing Address PO BOX 52592		Transaction ID: SA11AI.85270
City LAFAYETTE	State LA	Zip Code 70505
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer THE NEW LIFE FOUNDATION	Occupation SELF EMPLOYED	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C.

Full Name (Last, First, Middle Initial) MRS BESSIE L PERKINS		Date of Receipt MM / DD / YYYY 03 / 04 / 2008
Mailing Address 2508 PINE BLUFF RD		Transaction ID: SA11AI.85341
City COLORADO SPGS	State CO	Zip Code 80909
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer INFO REQUESTED- NOT RECD	Occupation INFO REQUESTED- NOT RECD	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	7800.00
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 14 / 53
	<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.

Full Name (Last, First, Middle Initial)
MRS JAMES T PURSELL

Mailing Address 1971 MARBLE VALLEY RD

City State Zip Code
SYLACAUGA AL 35151

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

Name of Employer Occupation
PURSELL TECHNOLOGIES CHAIRMAN

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2008

Transaction ID: SA11AI.85114

Amount of Each Receipt this Period
2500.00

B.

Full Name (Last, First, Middle Initial)
ANDREW F PUZDER

Mailing Address 6307 CARPINTERIA AVE STE A

City State Zip Code
CARPINTERIA CA 93013

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

Name of Employer Occupation
CKE RESTAURANTS INC INFO REQUESTED- NOT RECD

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: SA11AI.85409

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
MR DONALD B REECE

Mailing Address 22225 WOOD RUN CT

City State Zip Code
BONITA SPRINGS FL 34135

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

Name of Employer Occupation
NORTHWESTERN MUTUAL LIFE RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2008

Transaction ID: SA11AI.85104

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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 15 / 53
	<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.	Full Name (Last, First, Middle Initial) MR MICHAEL D RISINGER		Date of Receipt
	Mailing Address 421 E GREENWOOD ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 11 / 2008
	City	State	Zip Code
	MORTON	IL	61550
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.85242
Name of Employer SELF		Occupation LAWYER	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00
		<input type="text"/> 900.00	

B.	Full Name (Last, First, Middle Initial) MRS MYRA K SCHLIESING		Date of Receipt
	Mailing Address PO BOX 769		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 11 / 2008
	City	State	Zip Code
	GLENNALLEN	AK	99588
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.85488
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 500.00	

C.	Full Name (Last, First, Middle Initial) MR CHARLES J SCHREIBER, JR		Date of Receipt
	Mailing Address 27091 HIDDEN TRAIL RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 07 / 2008
	City	State	Zip Code
	LAGUNA HILLS	CA	92653
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.85395
Name of Employer SELF		Occupation REAL ESTATE INVESTER	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00
		<input type="text"/> 5000.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5800.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 16 / 53

(check only one)

<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.

Full Name (Last, First, Middle Initial)
MRS JILL K SCHREIBER

Mailing Address 27091 HIDDEN TRAIL RD

City State Zip Code
LAGUNA HILLS CA 92653

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	0	8

Transaction ID: SA11AI.85397

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
MISS MARILEE SCHREIBER

Mailing Address 302 1/2 COLLINS AVE

City State Zip Code
NEWPORT BEACH CA 92662

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

Name of Employer Occupation
INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID: SA11AI.85399

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
MRS MICHELLE SCHREIBER

Mailing Address 24528 COPPER CLIFF COURT

City State Zip Code
LAKE FOREST CA 92630

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

Name of Employer Occupation
INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID: SA11AI.85391

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) ▶

15000.00

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 53
(check only one)

<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.

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

Mailing Address 15 HILLWOOD RD

City State Zip Code
MOBILE AL 36608

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

Name of Employer Occupation
GULF LUMBER CO PRESIDENT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2008

Transaction ID: SA11AI.85123

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
MR GEORGE W STRAKE

Mailing Address 2 STAGE STOP CIR

City State Zip Code
HOUSTON TX 77024

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

Name of Employer Occupation
CUSHMAN & WAKEFIELD REAL ESTATE

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2008

Transaction ID: SA11AI.85299

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
MR G EDWARD EDWARD SUITER

Mailing Address 2025 LAMBERT CT

City State Zip Code
PLANO TX 75075

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2008

Transaction ID: SA11AI.85288

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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 18 / 53
(check only one)

<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.

Full Name (Last, First, Middle Initial)
MS DEBRA THOMAS

Mailing Address 19113 CHEMILLE DR

City LUTZ State FL Zip Code 33558

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

Name of Employer POST PROPERTIES Occupation GENERAL MANAGER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 03 / 26 / 2008
Transaction ID: SA11AI.85097
Amount of Each Receipt this Period 1000.00

B.

Full Name (Last, First, Middle Initial)
JOHN W TIMMONS

Mailing Address 1444 BETHEL CHURCH RD

City ELKTON State VA Zip Code 22827

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

Name of Employer ROCKINGHAM MEMORIAL HOSPITAL Occupation PHYSICIAN

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1330.00

Date of Receipt 03 / 31 / 2008
Transaction ID: SA11AI.85035
Amount of Each Receipt this Period 1000.00

C.

Full Name (Last, First, Middle Initial)
CLIFFORD F TRACY

Mailing Address 18747 SAN FELIPE ST

City FOUNTAIN VALLEY State CA Zip Code 92708

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 10 / 2008
Transaction ID: SA11AI.85403
Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ► 2300.00

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 19 / 53
	(check only one)	
<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.	Full Name (Last, First, Middle Initial) MR ROBERT K WORMALD		Date of Receipt
	Mailing Address 10121 CHAPEL RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 04 / 2008
	City	State	Zip Code
	POTOMAC	MD	20854
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.85024
	C		Amount of Each Receipt this Period
Name of Employer INFO REQUESTED- NOT RECD		500.00	
Occupation INFO REQUESTED- NOT RECD			
Receipt For: 2006		Aggregate Year-to-Date ▼ 500.00	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	48650.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 20 / 53	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) Campaign for Working Families
--

A.

Full Name (Last, First, Middle Initial) BB&T		Date of Receipt
Mailing Address P.O. Box 580363		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2008
City	State	Zip Code
Charlotte	NC	28258
FEC ID number of contributing federal political committee.		Transaction ID: SA17.85532
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text"/> 934.73
Occupation		INTEREST INCOME
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 4168.79	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 934.73
TOTAL This Period (last page this line number only)	<input type="text"/> 934.73

**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)

PAGE 21 / 53

<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.	Full Name (Last, First, Middle Initial) ACCESS BANK	Transaction ID: SB21B.85503
	Mailing Address 1800 ROBERT FULTON DRIVE	Date of Disbursement 03 / 24 / 2008
	City RESTON State VA Zip Code 20191	Amount of Each Disbursement this Period 48.01
	Purpose of Disbursement CREDIT CARD PROCESSING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ACCESS BANK	Transaction ID: SB21B.85502
	Mailing Address 1800 ROBERT FULTON DRIVE	Date of Disbursement 03 / 31 / 2008
	City RESTON State VA Zip Code 20191	Amount of Each Disbursement this Period 463.95
	Purpose of Disbursement CREDIT CARD PROCESSING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Daniel Allott	Transaction ID: SB21B.85513
	Mailing Address 2800 Shirlington Road, Suite 930	Date of Disbursement 03 / 21 / 2008
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement WRITING SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1011.96
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.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.85495 Date of Disbursement																			
	Mailing Address P.O. Box 981540	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	0	8												
	City El Paso State TX Zip Code 79998	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CREDIT CARD PROCESSING	<table border="1"><tr><td>56.23</td></tr></table>	56.23																		
56.23																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.85497 Date of Disbursement																			
	Mailing Address P.O. Box 981540	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	8		2	0	0	8												
	City El Paso State TX Zip Code 79998	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CREDIT CARD PROCESSING	<table border="1"><tr><td>4.50</td></tr></table>	4.50																		
4.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.85498 Date of Disbursement																			
	Mailing Address P.O. Box 981540	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	0		2	0	0	8												
	City El Paso State TX Zip Code 79998	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CREDIT CARD PROCESSING	<table border="1"><tr><td>37.38</td></tr></table>	37.38																		
37.38																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>98.11</td></tr></table>	98.11
98.11		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.85499 Date of Disbursement
	Mailing Address P.O. Box 981540	<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City El Paso State TX Zip Code 79998	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PROCESSING	<input type="text" value="4.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.85501 Date of Disbursement
	Mailing Address P.O. Box 981540	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City El Paso State TX Zip Code 79998	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PROCESSING	<input type="text" value="31.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Gary Bauer	Transaction ID: SB21B.85530 Date of Disbursement
	Mailing Address 2800 Shirlington Road	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement CONSULTING - PAC POLITICAL FUNDRAISING	<input type="text" value="4500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4535.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

PAGE 24 / 53

<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.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.85493
	Mailing Address P.O. Box 580363	Date of Disbursement MM / DD / YYYY 03 / 04 / 2008
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 21.15
	Purpose of Disbursement BANK FEES	Category/ Type
	Candidate Name	
	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:	

B.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.85494
	Mailing Address P.O. Box 580363	Date of Disbursement MM / DD / YYYY 03 / 04 / 2008
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 9.95
	Purpose of Disbursement BANK FEES	Category/ Type
	Candidate Name	
	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:	

C.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.85511
	Mailing Address P.O. Box 580363	Date of Disbursement MM / DD / YYYY 03 / 14 / 2008
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 14516.75
	Purpose of Disbursement TAXES	Category/ Type
	Candidate Name	
	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)	▶	14547.85
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.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.85496
	Mailing Address P.O. Box 580363	Date of Disbursement 03 / 17 / 2008
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 70.88
	Purpose of Disbursement CREDIT CARD PROCESSING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.85490
	Mailing Address P.O. Box 580363	Date of Disbursement 03 / 31 / 2008
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 103.63
	Purpose of Disbursement BANK FEES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CAPITOL ADVANTAGE	Transaction ID: SB21B.85505
	Mailing Address P.O. 1223	Date of Disbursement 03 / 10 / 2008
	City McLean State VA Zip Code 22101	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement DUES AND SUBSCRIPTIONS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1674.51
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.	Full Name (Last, First, Middle Initial) LPS	Transaction ID: SB21B.85510 Date of Disbursement 03 / 10 / 2008
	Mailing Address P.O. BOX 2325	Amount of Each Disbursement this Period 896.18
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement PAC - DATA PROCESSING SERVICES	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LPS	Transaction ID: SB21B.85520 Date of Disbursement 03 / 21 / 2008
	Mailing Address P.O. BOX 2325	Amount of Each Disbursement this Period 981.60
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement PAC - DATA PROCESSING SERVICES	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MGP Shirlington Gateway	Transaction ID: SB21B.85525 Date of Disbursement 03 / 26 / 2008
	Mailing Address P.O. Box 201630	Amount of Each Disbursement this Period 371.04
	City Dallas State TX Zip Code 75320	
	Purpose of Disbursement RENT	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2248.82
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.	Full Name (Last, First, Middle Initial) Bill Moeller	Transaction ID: SB21B.85526 Date of Disbursement 03 / 26 / 2008
	Mailing Address 2800 Shirlington Road #930	Amount of Each Disbursement this Period 1250.00
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement CONSULTING - POLITICAL RESEARCHER/WRITER	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PMC	Transaction ID: SB21B.85521 Date of Disbursement 03 / 21 / 2008
	Mailing Address 7201 Lockport Place	Amount of Each Disbursement this Period 6402.98
	City Lorton State VA Zip Code 22079	
	Purpose of Disbursement PAC - DIRECT MAIL PRODUCTION	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RECORDS MGMT INC	Transaction ID: SB21B.85531 Date of Disbursement 03 / 26 / 2008
	Mailing Address 7726 Southern Drive	Amount of Each Disbursement this Period 204.82
	City Springfield State VA Zip Code 22150	
	Purpose of Disbursement STORAGE FEES	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	7857.80
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.	Full Name (Last, First, Middle Initial) VERIZON	Transaction ID: SB21B.85523
	Mailing Address P.O. Box 17577	Date of Disbursement 03 / 21 / 2008
	City Baltimore State MD Zip Code 21297	Amount of Each Disbursement this Period 410.88
	Purpose of Disbursement TELEPHONE SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Dean Virag	Transaction ID: SB21B.85506
	Mailing Address 14039 Westwind Lane	Date of Disbursement 03 / 10 / 2008
	City Culpeper State VA Zip Code 22701	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement COMPUTER SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) WASHINGTON INTELLIGENCE BUREAU	Transaction ID: SB21B.85524
	Mailing Address 4128 PEPSI PLACE	Date of Disbursement 03 / 21 / 2008
	City CHANTILLY State VA Zip Code 20151	Amount of Each Disbursement this Period 1340.98
	Purpose of Disbursement PAC - CAGING AND DATA ENTRY SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	2251.86
TOTAL This Period (last page this line number only)	▶	44763.64

**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)

PAGE 31 / 53

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

Full Name (Last, First, Middle Initial)
COMMITTEE TO REELECT CONGRESSMAN CHRIS SMITH

Transaction ID: SB23.85517

Date of Disbursement

Mailing Address P.O. Box 3184
P.O. Box 3184

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

City Hamilton State NJ Zip Code 08619

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
CONTRIBUTION

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAPITOL ADVANTAGE	Nature of Debt (Purpose): Dues and Subscriptions
Mailing Address P.O. 1223	
City State ZIP Code McLean VA 22101	

Outstanding Balance Beginning This Period 1500.00	Transaction ID: SD10.84975	
Amount Incurred This Period 0.00	Payment This Period 1500.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor DIRECTECH, INC	Nature of Debt (Purpose): Caging & Data Processing
Mailing Address 8595 Grovemont Circle	
City State ZIP Code Gaithersburg MD 20877	

Outstanding Balance Beginning This Period 223.11	Transaction ID: SD10.42032	
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 MWM Direct Marketing Services	Nature of Debt (Purpose): Direct Mail
Mailing Address 8048 Hillrise Court	
City State ZIP Code Elkridge MD 21075	

Outstanding Balance Beginning This Period 2320.90	Transaction ID: SD10.15344	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2320.90

1) SUBTOTALS This Period This Page (optional).....	▶	2544.01
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 33 / 53	
	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 PMC			Nature of Debt (Purpose): PAC - Direct Mail Production
Mailing Address 7201 Lockport Place			
City Lorton	State VA	ZIP Code 22079	

Outstanding Balance Beginning This Period		Transaction ID: SD10.84974	
6402.98			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	6402.98	0.00	

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	2544.01
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)	2544.01

Image# 28931216639

Form/Schedule: **SA11AI** 0101633-0000286

Transaction ID: **SA11AI.85300**

Form/Schedule: **SA11AI** 0103804-0000379

Transaction ID: **SA11AI.85406**

Image# 28931216640

Form/Schedule: **SA11AI** 0083338-0000346

Transaction ID: **SA11AI.85370**

Form/Schedule: **SA11AI** 0012784-0000091

Transaction ID: **SA11AI.85086**

Image# 28931216641

Form/Schedule: **SA11AI** 0012784-0000092

Transaction ID: **SA11AI.85087**

Form/Schedule: **SA11AI** 0104665-0000119

Transaction ID: **SA11AI.85116**

Image# 28931216642

Form/Schedule: **SA11AI** 0101603-0000197

Transaction ID: **SA11AI.85202**

Form/Schedule: **SA11AI** 0032286-0000432

Transaction ID: **SA11AI.85464**

Image# 28931216643

Form/Schedule: **SA11AI** 0101847-0000397

Transaction ID: **SA11AI.85426**

Form/Schedule: **SA11AI** 0105009-0000445

Transaction ID: **SA11AI.85481**

Image# 28931216644

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Transaction ID: **SA11AI.85119**

Form/Schedule: **SA11AI** 0098613-0000136

Transaction ID: **SA11AI.85136**

Image# 28931216645

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Transaction ID: **SA11AI.85324**

Form/Schedule: **SA11AI** 0105029-0000252

Transaction ID: **SA11AI.85266**

Image# 28931216646

Form/Schedule: **SA11AI** 0103997-0000012

Transaction ID: **SA11AI.84991**

Form/Schedule: **SA11AI** 0076318-0000032

Transaction ID: **SA11AI.85013**

Image# 28931216647

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Transaction ID: **SA11AI.85199**

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Transaction ID: **SA11AI.85088**

Image# 28931216648

Form/Schedule: **SA11AI** 0038115-0000200

Transaction ID: **SA11AI.85205**

Form/Schedule: **SA11AI** 0103047-0000343

Transaction ID: **SA11AI.85368**

Image# 28931216649

Form/Schedule: **SA11AI** 0104814-0000163

Transaction ID: **SA11AI.85164**

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Transaction ID: **SA11AI.85185**

Image# 28931216650

Form/Schedule: **SA11AI** 0090913-0000257

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Form/Schedule: **SA11AI** 0027139-0000322

Transaction ID: **SA11AI.85341**

Image# 28931216651

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Transaction ID: **SA11AI.85114**

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Transaction ID: **SA11AI.85409**

Image# 28931216652

Form/Schedule: **SA11AI** 0029943-0000108

Transaction ID: **SA11AI.85104**

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Image# 28931216653

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Transaction ID: **SA11AI.85488**

Form/Schedule: **SA11AI** 0001011-0000366

Transaction ID: **SA11AI.85395**

Image# 28931216654

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Transaction ID: **SA11AI.85397**

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Transaction ID: **SA11AI.85399**

Image# 28931216655

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Transaction ID: **SA11AI.85035**

Image# 28931216658

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Transaction ID: **SA11AI.85024**
