

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 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2007 through 12 31 2007

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 02 01 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.

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)

Page 2

Write or Type Committee Name
Campaign for Working Families

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		1017233.67
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	1108215.39									
(c) Total Receipts (from Line 19)	380536.36	704564.51								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1488751.75	1721798.18								
7. Total Disbursements (from Line 31)	149024.74	382071.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1339727.01	1339727.01								
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)	12724.15									

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:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	220875.72	416565.72
(i) Itemized (use Schedule A)	119775.86	233364.34
(ii) Unitemized	340651.58	649930.06
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	340651.58	649930.06
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)	283.05	283.05
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	39601.73	54351.40
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))	380536.36	704564.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	380536.36	704564.51

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.....	148994.74	369708.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	148994.74	369708.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	12250.00
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	30.00	113.00
(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))	30.00	113.00
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))..	149024.74	382071.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	149024.74	382071.17

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)	340651.58	649930.06
34. Total Contribution Refunds (from Line 28(d))	30.00	113.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	340621.58	649817.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	148994.74	369708.17
37. Offsets to Operating Expenditures (from Line 15, page 3)	283.05	283.05
38. Net Operating Expenditures (subtract Line 37 from Line 36)	148711.69	369425.12

**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 / 229
	<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 CHRISTOPHER ALLEN		Date of Receipt
	Mailing Address 600 TRAVIS ST STE 4200		<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 1 2 / 2 0 / 2 0 0 7
	City	State	Zip Code
	HOUSTON	TX	77002
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.82630
Name of Employer ANDREWS & KURTH LLP		Occupation ATTORNEY	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

B.	Full Name (Last, First, Middle Initial) MR MARK ANDREWS, JR		Date of Receipt
	Mailing Address 11 CHESTERFIELD LAKES 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 1 2 / 2 0 / 2 0 0 7
	City	State	Zip Code
	CHESTERFIELD	MO	63005
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.82256
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 700.00

C.	Full Name (Last, First, Middle Initial) MR JAMES I ANTHONY, JR		Date of Receipt
	Mailing Address 3336 ALLEGHANY 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 1 0 / 2 2 / 2 0 0 7
	City	State	Zip Code
	RALEIGH	NC	27609
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80791
Name of Employer A & CO		Occupation CEO	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1200.00
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 7 / 229
(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. Full Name (Last, First, Middle Initial)
MRS AMANDA A APPLGATH

Mailing Address 22530 BUCKTROUT LN

City State Zip Code
KATY TX 77449

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.82670

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
MR RAMON D ARDIZZONE

Mailing Address 5416 CHALLISFORD LN

City State Zip Code
CHARLOTTE NC 28226

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	0	7

Transaction ID: SA11AI.80825

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
DENISE ARENDS

Mailing Address 2176 66TH AVE NE

City State Zip Code
WILLMAR MN 56201

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

Name of Employer Occupation
ACCURPRESS INC ADMINISTRATIVE ASSISTANT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	1	/	2	0	0	7

Transaction ID: SA11AI.82034

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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 8 / 229
	<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 CHRIS AYERS

Mailing Address 828 OLNEY OAK DR

City HOUSTON State TX Zip Code 77079

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

Name of Employer CONOCO INDONESIA Occupation MANAGE ECONOMICS & PLANNING

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 11 / 26 / 2007
Transaction ID: SA11AI.82650
 Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
MR CHARLES D AYRES

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: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 11 / 2007
Transaction ID: SA11AI.83291
 Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
MR CHARLES D AYRES

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: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 04 / 2007
Transaction ID: SA11AI.83292
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

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 9 / 229
	<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 CHARLES D AYRES		Date of Receipt
Mailing Address 4911 CASA ORO DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 2 / 2 0 0 7
City State Zip Code YORBA LINDA CA 92886		Transaction ID: SA11AI.83293
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period <input type="text"/> 100.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 500.00	

B.

Full Name (Last, First, Middle Initial) MR CHARLES D AYRES		Date of Receipt
Mailing Address 4911 CASA ORO DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 0 / 2 0 0 7
City State Zip Code YORBA LINDA CA 92886		Transaction ID: SA11AI.83294
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period <input type="text"/> 100.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 600.00	

C.

Full Name (Last, First, Middle Initial) MR JOHN D BAER		Date of Receipt
Mailing Address 15739 TOEPFER ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 2 1 / 2 0 0 7
City State Zip Code TREMONT IL 61568		Transaction ID: SA11AI.82227
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period <input type="text"/> 1200.00
Name of Employer TREMONT MEDICAL CLINIC	Occupation FAMILY PHYSICIAN	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 1200.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1400.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 229
(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. Full Name (Last, First, Middle Initial)
MRS CHRISTINE W BARR

Mailing Address 11315 HIGHLAND DR S

City State Zip Code
PLAINFIELD IL 60585

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

Name of Employer Occupation
HOUSEWIFE HOUSEWIFE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.82186

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS CHRISTINE W BARR

Mailing Address 11315 HIGHLAND DR S

City State Zip Code
PLAINFIELD IL 60585

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

Name of Employer Occupation
HOUSEWIFE HOUSEWIFE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.82187

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
CYNTHIA BARR

Mailing Address 8612 KERRY LANE

City State Zip Code
SPRINGFIELD VA 22152

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

Name of Employer Occupation
SELF EMPLOYED SALES

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.80680

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional) ► **550.00**

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

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

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

FOR LINE NUMBER: PAGE 11 / 229
(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. Full Name (Last, First, Middle Initial)
Mr. DAVID BATLUCK

Mailing Address 17 MULLIGAN DR

City State Zip Code
READING PA 19606

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

Name of Employer Occupation
ST JOSEPH MEDICAL CENTER PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	7

Transaction ID: SA11AI.80586

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MS PATRICIA BECK

Mailing Address 4605 94TH ST

City State Zip Code
LUBBACK TX 79424

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

Name of Employer Occupation
HOUSEWIFE HOUSEWIFE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	0	7

Transaction ID: SA11AI.82759

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR CLIFF BENSON, JR

Mailing Address 12921 DURAN RD
PO BOX 97365

City State Zip Code
RALEIGH NC 27614

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

Name of Employer Occupation
GREY BULL INC RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	1	/	2	0	0	7

Transaction ID: SA11AI.80794

Amount of Each Receipt this Period
2500.00

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: PAGE 12 / 229
(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. Full Name (Last, First, Middle Initial)
MR DUANE C BERKOMPAS

Mailing Address PO BOX 2168

City State Zip Code
COLUMBUS OH 43216

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	0	7

Transaction ID: SA11AI.81350

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR RAY BERRYMAN

Mailing Address 12137 CRESCENT COVE COURT

City State Zip Code
WINDERMERE FL 34786

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

Name of Employer Occupation
WINDERMERE MINISTRIES MISSIONS PASTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	7

Transaction ID: SA11AI.81144

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
DR GARY R BISHOP

Mailing Address 15144 LARRY STREET

City State Zip Code
POWAY CA 92064

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

Name of Employer Occupation
RIVERSIDE COUNTY PHARMACIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.83148

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ► **5285.00**

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 13 / 229

(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 KENNETH N BLACKBURN

Mailing Address 10 SHALLOWBROOK DR

City State Zip Code
O FALLON IL 62269

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

Name of Employer Occupation
USAF PILOT

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.82243

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
MR KENNETH N BLACKBURN

Mailing Address 10 SHALLOWBROOK DR

City State Zip Code
O FALLON IL 62269

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

Name of Employer Occupation
USAF PILOT

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.82244

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
MRS PAMELA KILBER BLAKE

Mailing Address 16831 CEDARCREST DR

City State Zip Code
EDEN PRAIRIE MN 55347

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

Name of Employer Occupation
CENTEX HOMES HOME BUILDER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: SA11AI.81959

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

1050.00

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 14 / 229
(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 NANCY A BLANK

Mailing Address 20368 N 93RD PL

City State Zip Code
SCOTSDALE AZ 85255

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
09 / 17 / 2007

Transaction ID: SA11AI.82964

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
MRS BERNADETTE BLASK

Mailing Address 7458 MILLRACE LN

City State Zip Code
NORTHFIELD OH 44067

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED SCHOOL BUS DR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
12 / 07 / 2007

Transaction ID: SA11AI.81365

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
MR R CLARK BODDY

Mailing Address 156 THELMA DR

City State Zip Code
SAN ANTONIO TX 78212

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HQ GLOBAL WORK PLACES INC OFFICE LEASING

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 19 / 2007

Transaction ID: SA11AI.82701

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) 1200.00

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 15 / 229
	(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 ANGELINE BOERSMA		Date of Receipt	
	Mailing Address 2634 NE 6TH ST		M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.83497
	GRESHAM	OR	97030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

B.	Full Name (Last, First, Middle Initial) RONALD J BOOMSTRA		Date of Receipt	
	Mailing Address 585 BIRCHWOOD ST		M M / D D / Y Y Y Y Y 1 2 / 1 0 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.81679
	JACKSON	MI	49203	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer RETIRED		Occupation RETIRED MILITARY		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

C.	Full Name (Last, First, Middle Initial) MR. RONALD A BOSS		Date of Receipt	
	Mailing Address 977 COACHWAY		M M / D D / Y Y Y Y Y 0 9 / 2 6 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.80639
	ANNAPOLIS	MD	21401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00		

SUBTOTAL of Receipts This Page (optional)	▶	900.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 229

(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. RONALD A BOSS

Mailing Address 977 COACHWAY

City State Zip Code
ANNAPOLIS MD 21401

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	7

Transaction ID: SA11AI.80640

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
MR. RONALD A BOSS

Mailing Address 977 COACHWAY

City State Zip Code
ANNAPOLIS MD 21401

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	0	7

Transaction ID: SA11AI.80641

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MR. RONALD A BOSS

Mailing Address 977 COACHWAY

City State Zip Code
ANNAPOLIS MD 21401

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	7

Transaction ID: SA11AI.80642

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 17 / 229
(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. Full Name (Last, First, Middle Initial)
MRS VIRGINIA H BOUKNIGHT
 Mailing Address 308 NEELY FERRY RD
 City State Zip Code
 SIMPSONVILLE SC 29680
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 7
Transaction ID: SA11AI.80898
 Amount of Each Receipt this Period
 2000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

B. Full Name (Last, First, Middle Initial)
MR BILLY B BRADLEY
 Mailing Address 1 INDIAN HLS
 City State Zip Code
 EASTLAND TX 76448
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 7 / 2 0 0 7
Transaction ID: SA11AI.82601
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 EBAA IRON INC PRES/CEO
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

C. Full Name (Last, First, Middle Initial)
MR EARL BRADLEY
 Mailing Address BOX 877
 City State Zip Code
 EASTLAND TX 76448
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 7 / 2 0 0 7
Transaction ID: SA11AI.82602
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 EBAA IRON INC PRES/CEO
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

SUBTOTAL of Receipts This Page (optional) ► **3000.00**
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 / 229
(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
							17

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A.

Full Name (Last, First, Middle Initial)
MRS GAYLE BREES

Mailing Address 2213 S 112TH DRIVE

City AVONDALE State AZ Zip Code 85323

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

Name of Employer
INFO REQUESTED, NOT RECD

Occupation
INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
11 / 14 / 2007

Transaction ID: SA11AI.82973

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
MR TERRY O BRISTOL

Mailing Address 344 E FOOTHILLS PKWY
RED ROOM 9-W

City FORT COLLINS State CO Zip Code 80525

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

Name of Employer
344E FOOTHILLS PARKWAY FC
COLORADO

Occupation
ASSET MGR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2007

Transaction ID: SA11AI.82840

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
MR TERRY O BRISTOL

Mailing Address 344 E FOOTHILLS PKWY
RED ROOM 9-W

City FORT COLLINS State CO Zip Code 80525

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

Name of Employer
344E FOOTHILLS PARKWAY FC
COLORADO

Occupation
ASSET MGR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
12 / 05 / 2007

Transaction ID: SA11AI.82841

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶ **400.00**

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 / 229
(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 TERRY O BRISTOL

Mailing Address 344 E FOOTHILLS PKWY
RED ROOM 9-W

City State Zip Code
FORT COLLINS CO 80525

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

Name of Employer 344E FOOTHILLS PARKWAY FC COLORADO
Occupation ASSET MGR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 11 / 2007

Transaction ID: SA11AI.82842

Amount of Each Receipt this Period
50.00

B.

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

Mailing Address 12789 NORTH MUIRFIELD

City State Zip Code
JACKSONVILLE FL 32225

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

Name of Employer SMURFIT STORE CONT. CORP
Occupation GEN MGR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 27 / 2007

Transaction ID: SA11AI.81037

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
MRS KAREN L BROOKS

Mailing Address 2789 N MUIRFIELD

City State Zip Code
JACKSONVILLE FL 32225

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

Name of Employer HOUSEWIFE
Occupation HOUSEWIFE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 10 / 2007

Transaction ID: SA11AI.81040

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **200.00**

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 20 / 229
(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 WENDELL BROWN

Mailing Address 300 N FILLMORE ST

City State Zip Code
ARLINGTON VA 22201

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

Name of Employer SELF Occupation ACCOIUNTATN

Receipt For: 2008
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	7

Transaction ID: SA11AI.80686

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
MR WENDELL BROWN

Mailing Address 300 N FILLMORE ST

City State Zip Code
ARLINGTON VA 22201

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

Name of Employer SELF Occupation ACCOIUNTATN

Receipt For: 2008
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	0	7

Transaction ID: SA11AI.80687

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
MR WENDELL BROWN

Mailing Address 300 N FILLMORE ST

City State Zip Code
ARLINGTON VA 22201

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

Name of Employer SELF Occupation ACCOIUNTATN

Receipt For: 2008
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	7

Transaction ID: SA11AI.80688

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional) ▶

70.00

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 21 / 229
(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. Full Name (Last, First, Middle Initial)
MR WENDELL BROWN

Mailing Address 300 N FILLMORE ST

City ARLINGTON State VA Zip Code 22201

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

Name of Employer SELF Occupation ACCOIUNTATN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 11 / 15 / 2007
Transaction ID: SA11AI.80689
 Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
MR WENDELL BROWN

Mailing Address 300 N FILLMORE ST

City ARLINGTON State VA Zip Code 22201

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

Name of Employer SELF Occupation ACCOIUNTATN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 12 / 07 / 2007
Transaction ID: SA11AI.80690
 Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
MR WENDELL BROWN

Mailing Address 300 N FILLMORE ST

City ARLINGTON State VA Zip Code 22201

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

Name of Employer SELF Occupation ACCOIUNTATN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 17 / 2007
Transaction ID: SA11AI.80691
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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 22 / 229

(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 & MRS DALE L BUBECK

Mailing Address 1507 2ND ST SW

City State Zip Code
CLARION IA 50525

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: SA11AI.81785

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
MR THOMAS W BURKE, JR

Mailing Address 6007 VALLEY FORGE DR

City State Zip Code
HOUSTON TX 77057

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

Name of Employer Occupation
SUPREME MANUFACTURING CO OIL FIELD EQUIPMENT

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: SA11AI.82640

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
PHIL BURRESS

Mailing Address 6565 ZEBRA CT

City State Zip Code
WEST CHESTER OH 45069

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

Name of Employer Occupation
CITIZENS FOR COMMUNITY VALUES PRESIDENT

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.81404

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1100.00

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 23 / 229
	<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 LISA CAHILL	Date of Receipt MM / DD / YYYY 12 / 21 / 2007
	Mailing Address 134 DUNCAN CIR	Transaction ID: SA11AI.80470
	City State Zip Code BEAVER PA 15009	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: 2008 <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) MR RODNEY CARLSON	Date of Receipt MM / DD / YYYY 08 / 20 / 2007
	Mailing Address PO BOX 177	Transaction ID: SA11AI.82195
	City State Zip Code CAMPUS IL 60920	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation SELF EMPLOYED FARMER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) MR DAVID S CARROLL, JR	Date of Receipt MM / DD / YYYY 10 / 08 / 2007
	Mailing Address 235 RIVERREDGE CV	Transaction ID: SA11AI.81263
	City State Zip Code CORDOVA TN 38018	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation USAGE DEFINED SOFTWARE CONSULANT	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	950.00
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 24 / 229
(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 DAVID S CARROLL, JR

Mailing Address 235 RIVERREDGE CV

City State Zip Code
CORDOVA TN 38018

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

Name of Employer Occupation
USAGE DEFINED SOFTWARE CONSULANT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.81264

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
CHARRON CASTALDO

Mailing Address 10811 LACONIA DR

City State Zip Code
VILLA PARK CA 92861

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

Name of Employer Occupation
DON BRANDEL PLUMBING INC PLUMBING CONTRACTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.83281

Amount of Each Receipt this Period
250.00

C.

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

Mailing Address 1023 NE 98TH STREET

City State Zip Code
SEATTLE WA 98115

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

Name of Employer Occupation
NORTHWEST HOSP C T TECHNOLOGIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.83626

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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 25 / 229

(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 GORDON CHAN

Mailing Address 1023 NE 98TH STREET

City State Zip Code
SEATTLE WA 98115

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
NORTHWEST HOSP C T TECHNOLOGIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	0	7

Transaction ID: SA11AI.83627

Amount of Each Receipt this Period
50.00

B.

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

Mailing Address 1023 NE 98TH STREET

City State Zip Code
SEATTLE WA 98115

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
NORTHWEST HOSP C T TECHNOLOGIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	0	7

Transaction ID: SA11AI.83628

Amount of Each Receipt this Period
50.00

C.

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

Mailing Address 1023 NE 98TH STREET

City State Zip Code
SEATTLE WA 98115

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
NORTHWEST HOSP C T TECHNOLOGIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	5		2	0	0	7

Transaction ID: SA11AI.83629

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) 150.00

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 26 / 229
(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. Full Name (Last, First, Middle Initial)
MR GORDON CHAN

Mailing Address 1023 NE 98TH STREET

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: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 11 / 05 / 2007
Transaction ID: SA11AI.83630
 Amount of Each Receipt this Period 50.00

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

Mailing Address 1023 NE 98TH STREET

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: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 12 / 05 / 2007
Transaction ID: SA11AI.83631
 Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
MR C DAN CHENOWETH

Mailing Address 5515 W RICHEY RD

City HOUSTON State TX Zip Code 77066

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

Name of Employer TWS CO INC Occupation CHAIRMAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 20 / 2007
Transaction ID: SA11AI.82642
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 350.00

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 27 / 229
	<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 C DAN CHENOWETH	Date of Receipt M M / D D / Y Y Y Y Y 09 / 26 / 2007
	Mailing Address 5515 W RICHEY RD	Transaction ID: SA11AI.82643
	City HOUSTON State TX Zip Code 77066	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer TWS CO INC Occupation CHAIRMAN Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

B.	Full Name (Last, First, Middle Initial) MR ALBERT M CLERC	Date of Receipt M M / D D / Y Y Y Y Y 10 / 08 / 2007
	Mailing Address 7 WINSTON DR	Transaction ID: SA11AI.83248
	City COTO DE CAZA State CA Zip Code 92679	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer PATHWAY CAPITAL MANAGEMENT LLC Occupation INVESTMENT MANAGER Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

C.	Full Name (Last, First, Middle Initial) MR SUZANNE G COCHRAN, SR	Date of Receipt M M / D D / Y Y Y Y Y 12 / 10 / 2007
	Mailing Address 18938 PRESTON RD	Transaction ID: SA11AI.80655
	City HAGERSTOWN State MD Zip Code 21742	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer INFO REQUESTED, NOT RECD Occupation INFO REQUESTED- NOT RECD Receipt For: 2008 <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)	▶	1550.00
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 28 / 229
(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. Full Name (Last, First, Middle Initial)
MRS Z IDELLE COLLINS
 Mailing Address PO BOX 849
 City SHADY COVE State OR Zip Code 97539
 Date of Receipt MM / DD / YYYY 07 / 09 / 2007
 Transaction ID: SA11AI.83573
 Amount of Each Receipt this Period 1000.00
 FEC ID number of contributing federal political committee. C
 Name of Employer HOUSEWIFE Occupation HOUSEWIFE
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

B. Full Name (Last, First, Middle Initial)
MRS Z IDELLE COLLINS
 Mailing Address PO BOX 849
 City SHADY COVE State OR Zip Code 97539
 Date of Receipt MM / DD / YYYY 11 / 02 / 2007
 Transaction ID: SA11AI.83574
 Amount of Each Receipt this Period 4000.00
 FEC ID number of contributing federal political committee. C
 Name of Employer HOUSEWIFE Occupation HOUSEWIFE
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

C. Full Name (Last, First, Middle Initial)
MR BARTON L COMSTOCK
 Mailing Address 3075 GRANGE RD
 City BERRIEN SPRINGS State MI Zip Code 49103
 Date of Receipt MM / DD / YYYY 12 / 11 / 2007
 Transaction ID: SA11AI.81676
 Amount of Each Receipt this Period 400.00
 FEC ID number of contributing federal political committee. C
 Name of Employer SOUTHWESTERN MEDICAL CLIN-IC Occupation PHYSICIAN
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

SUBTOTAL of Receipts This Page (optional) ► 5400.00
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 29 / 229

(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 JOHN K COORS

Mailing Address 34385 RANCHERO RD

City State Zip Code
EVERGREEN CO 80439

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

Name of Employer Occupation
COORS TEK INC MANUFACTURING

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 18 / 2007

Transaction ID: SA11AI.82829

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
JUDI COOVER

Mailing Address BOX 433

City State Zip Code
PORTLAND PA 18351

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

Name of Employer Occupation
SELF EMPLOYED CONSULTANT

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 08 / 2007

Transaction ID: SA11AI.80563

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)
MRS KAREN A CORBIN

Mailing Address 7936 SNOWBERRY CIR

City State Zip Code
ORLANDO FL 32819

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2007

Transaction ID: SA11AI.81080

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1650.00

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 30 / 229

(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 MARGARET L COWAN

Mailing Address 85 HELEN ST

City State Zip Code
FANWOOD NJ 07023

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

Name of Employer Occupation
MERRILYN NY ADMINISTRATION

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	0		2	0	0	7

Transaction ID: SA11AI.80342

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MRS ELIZABETH CRAINE

Mailing Address 28977 OLD TRILBY RD

City State Zip Code
BROOKSVILLE FL 34602

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

Name of Employer Occupation
UNIVERSITY COMM HOSPITAL RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	7

Transaction ID: SA11AI.81136

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS ELIZABETH CRAINE

Mailing Address 28977 OLD TRILBY RD

City State Zip Code
BROOKSVILLE FL 34602

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

Name of Employer Occupation
UNIVERSITY COMM HOSPITAL RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	7

Transaction ID: SA11AI.81111

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

585.00

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 31 / 229
	<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 ELIZABETH CRAINE

Mailing Address 28977 OLD TRILBY RD

City State Zip Code
BROOKSVILLE FL 34602

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

Name of Employer Occupation
UNIVERSITY COMM HOSPITAL RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.81137

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MRS ELIZABETH CRAINE

Mailing Address 28977 OLD TRILBY RD

City State Zip Code
BROOKSVILLE FL 34602

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

Name of Employer Occupation
UNIVERSITY COMM HOSPITAL RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.81138

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
JAMES DAUGHERTY

Mailing Address 2000 OUTRIGGER DRIVE

City State Zip Code
EL DORADO HILLS CA 95762

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

Name of Employer Occupation
FAR WEST BUSINESS SYSTEMS BUSINESS OWNER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.83461

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **580.00**

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 32 / 229
(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. Full Name (Last, First, Middle Initial)
MR ROGER DAVIS, RET
Mailing Address 8160 TIARA ST
City VENTURA State CA Zip Code 93004
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: 2008
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00
Date of Receipt 11 / 15 / 2007
Transaction ID: SA11AI.83306
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
MR ROGER DAVIS, RET
Mailing Address 8160 TIARA ST
City VENTURA State CA Zip Code 93004
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: 2008
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 12 / 17 / 2007
Transaction ID: SA11AI.83307
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
MRS DOREEN DEBLIEK
Mailing Address 5523 WOODVIEW PASS
City MIDLAND State MI Zip Code 48642
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRD Occupation RETIRED
Receipt For: 2008
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 12 / 26 / 2007
Transaction ID: SA11AI.81645
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 140.00
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 33 / 229

(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 TOM DEHM

Mailing Address 3374 NW CONRAD DR

City State Zip Code
BEND OR 97701

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	7

Transaction ID: SA11AI.83577

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
MRS DOLORES J DEJONG

Mailing Address 516 ARIZONA AVE SW

City State Zip Code
ORANGE CITY IA 51041

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	7

Transaction ID: SA11AI.81808

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
MR LEONARD A DEO

Mailing Address 2 SYLDEO DRIVE

City State Zip Code
PARSIPPANY NJ 07054

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

Name of Employer Occupation
FLOWERS & GIFTS INC FLORIST

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	0	7

Transaction ID: SA11AI.80349

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

550.00

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 34 / 229
(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. Full Name (Last, First, Middle Initial)
MR LEONARD A DEO

Mailing Address 2 SYLDEO DRIVE

City PARSIPPANY State NJ Zip Code 07054

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

Name of Employer FLOWERS & GIFTS INC Occupation FLORIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 05 / 2007
Transaction ID: SA11AI.80350
 Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
MR WILLIAM A DIEDRICH, JR

Mailing Address 320 LANTERN LN

City PLAIN CITY State OH Zip Code 43064

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

Name of Employer SELF Occupation PATHOLOGIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 24 / 2007
Transaction ID: SA11AI.81341
 Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
MR WILLIAM A DIEDRICH, JR

Mailing Address 320 LANTERN LN

City PLAIN CITY State OH Zip Code 43064

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

Name of Employer SELF Occupation PATHOLOGIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 26 / 2007
Transaction ID: SA11AI.81342
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 35 / 229

(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 C A DILLON, III

Mailing Address 32 BEEKMAN RD

City State Zip Code
SUMMIT NJ 07901

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

Name of Employer Occupation
SALOMON SMITH BARNEY INVESTMENT ANAYLIST

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.80365

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
MR KIRK L DORN

Mailing Address 9 CHERRYWOOD DR

City State Zip Code
EAST NORTHPORT NY 11731

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

Name of Employer Occupation
RETIRED RET

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.80404

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
MS MARY ELLEN DOWNEY

Mailing Address 25 HILMA ST

City State Zip Code
QUINCY MA 02171

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.80289

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

550.00

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 36 / 229
(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. Full Name (Last, First, Middle Initial)
MR KATHLEEN A ECHELBARGER

Mailing Address 16207 LARCH WAY

City LYNNWOOD State WA Zip Code 98087

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

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 07 / 2007
Transaction ID: SA11AI.83624
 Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
MR KATHLEEN A ECHELBARGER

Mailing Address 16207 LARCH WAY

City LYNNWOOD State WA Zip Code 98087

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

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3750.00

Date of Receipt: 12 / 31 / 2007
Transaction ID: SA11AI.83625
 Amount of Each Receipt this Period: 3250.00

C. Full Name (Last, First, Middle Initial)
MR MICHAEL D ECHELBARGER

Mailing Address PO BOX 1

City LYNNWOOD State WA Zip Code 98046

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

Name of Employer: ECHELBARGER INVESTMENTS Occupation: REAL ESTATE DEVELOPEMENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 27 / 2007
Transaction ID: SA11AI.83618
 Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 4750.00

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 37 / 229
(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. Full Name (Last, First, Middle Initial)
MR MICHAEL D ECHELBARGER

Mailing Address PO BOX 1

City State Zip Code
LYNNWOOD WA 98046

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

Name of Employer Occupation
ECHELBARGER INVESTMENTS REAL ESTATE DEVELOPEMENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.83619

Amount of Each Receipt this Period
1750.00

B. Full Name (Last, First, Middle Initial)
MS LOIS EDGERLY

Mailing Address 32 HIGHLAND ST

City State Zip Code
CAMBRIDGE MA 02138

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

Name of Employer Occupation
INFO REQUESTED, NOT RECD WRITER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.80284

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR WILLIAM S EDGERLY

Mailing Address 32 HIGHLAND ST

City State Zip Code
CAMBRIDGE MA 02138

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	7

Transaction ID: SA11AI.80285

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **3750.00**

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 38 / 229
(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. Full Name (Last, First, Middle Initial)
MR WILLIAM S EDGERLY

Mailing Address 32 HIGHLAND ST

City State Zip Code
CAMBRIDGE MA 02138

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.80286

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
CAPRICE EGLOFF

Mailing Address 27001 HWY 128

City State Zip Code
YORKVILLE CA 95494

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.83428

Amount of Each Receipt this Period
165.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES ENGLUND

Mailing Address 302 CINDI CT

City State Zip Code
LONGVIEW TX 75605

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

Name of Employer MISSIONARY TECH TEAM Occupation ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.82577

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **865.00**

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 39 / 229
(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. Full Name (Last, First, Middle Initial)
MR. JAMES ENGLUND

Mailing Address 302 CINDI CT

City State Zip Code
LONGVIEW TX 75605

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

Name of Employer Occupation
MISSIONARY TECH TEAM ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.82578

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES ENGLUND

Mailing Address 302 CINDI CT

City State Zip Code
LONGVIEW TX 75605

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

Name of Employer Occupation
MISSIONARY TECH TEAM ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	7

Transaction ID: SA11AI.82579

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MRS KENNETH P ENSING

Mailing Address 1763 BRIDLE CREEK ST NE

City State Zip Code
KENTWOOD MI 49508

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.81725

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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 40 / 229

(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 JANICE ERICKSON

Mailing Address PO BOX 3006

City State Zip Code
BOOTHELL WA 98041

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

Name of Employer Occupation
CE PUBLICATIONS INC MAGAZINE PUBLISHER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.83617

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

PAUL EVANS

Mailing Address 520 FOREST COVE ROAD

City State Zip Code
LAKE BLUFF IL 60044

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.82124

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

HELEN K FARNHAM

Mailing Address 30 W-675 FERRY RD RT

City State Zip Code
NAPERVILLE IL 60563

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.81389

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

2800.00

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 41 / 229

(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 ETHELYN C FEY

Mailing Address 2454 160TH AVE

City State Zip Code
EDGERTON MN 56128

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

Name of Employer Occupation
HOUSEWIFE HOUSEWIFE

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	7

Transaction ID: SA11AI.82030

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
MR MICHAEL L FISCHER

Mailing Address 923 E CUMBERLAND RD

City State Zip Code
ORANGE CA 92865

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

Name of Employer Occupation
FOOTHILL RANCH ACCOUNTANT

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.83283

Amount of Each Receipt this Period

110.00

C.

Full Name (Last, First, Middle Initial)
MR JOHN W FRACK

Mailing Address 11143 PHILADELPHIA RD

City State Zip Code
WHITE MARSH MD 21162

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

Name of Employer Occupation
NORTHRUP GRUMMAN ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: SA11AI.80627

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

710.00

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 42 / 229
(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. Full Name (Last, First, Middle Initial)
MR CARL M FRANZELLA

Mailing Address 2329 SEVERN AVE

City State Zip Code
METAIRIE LA 70001

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

Name of Employer Occupation
SUN INTERIORS PRESIDENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	7

Transaction ID: SA11AI.82411

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
MR FRANK D FREUDENTHAL

Mailing Address 2909 LOVERS LANE

City State Zip Code
ST JOSEPH MO 64506

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	7

Transaction ID: SA11AI.82303

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR FRANCIS L FRIEND

Mailing Address 2125 LUANN LN APT 6

City State Zip Code
MADISON WI 53713

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

Name of Employer Occupation
INTERVARSITY CHRISTIAN FE-
LLOWSHIP MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.81894

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **675.00**

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 43 / 229
(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 FRANCIS L FRIEND

Mailing Address 2125 LUANN LN APT 6

City MADISON State WI Zip Code 53713

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

Name of Employer INTERVARSITY CHRISTIAN FELLOWSHIP Occupation MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 05 / 2007
Transaction ID: SA11AI.81895
Amount of Each Receipt this Period: 50.00

B.

Full Name (Last, First, Middle Initial)
MR WAYNE GARNER

Mailing Address 236 CROSS COUNTRY DR

City HEWITT State TX Zip Code 76643

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

Name of Employer RETIRED Occupation TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt: 07 / 09 / 2007
Transaction ID: SA11AI.82612
Amount of Each Receipt this Period: 50.00

C.

Full Name (Last, First, Middle Initial)
MR WAYNE GARNER

Mailing Address 236 CROSS COUNTRY DR

City HEWITT State TX Zip Code 76643

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

Name of Employer RETIRED Occupation TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt: 08 / 06 / 2007
Transaction ID: SA11AI.82613
Amount of Each Receipt this Period: 35.00

SUBTOTAL of Receipts This Page (optional) ► 135.00

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 44 / 229
(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 WAYNE GARNER

Mailing Address 236 CROSS COUNTRY DR

City State Zip Code
HEWITT TX 76643

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

Name of Employer Occupation
RETIRED TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
755.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 10 / 2007

Transaction ID: SA11AI.82614

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
MR WAYNE GARNER

Mailing Address 236 CROSS COUNTRY DR

City State Zip Code
HEWITT TX 76643

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

Name of Employer Occupation
RETIRED TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
805.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 15 / 2007

Transaction ID: SA11AI.82615

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
MR WAYNE GARNER

Mailing Address 236 CROSS COUNTRY DR

City State Zip Code
HEWITT TX 76643

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

Name of Employer Occupation
RETIRED TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
830.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 12 / 2007

Transaction ID: SA11AI.82616

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **100.00**

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 45 / 229

(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 WAYNE GARNER

Mailing Address 236 CROSS COUNTRY DR

City State Zip Code
HEWITT TX 76643

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

Name of Employer Occupation
RETIRED TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
855.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.82617

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
DR RAY R GIMLIN

Mailing Address 3238 SHALIMAR TER

City State Zip Code
PUEBLO CO 81008

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

Name of Employer Occupation
SELF EMPLOYED PHOTOGRAPHER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.82885

Amount of Each Receipt this Period

1200.00

C.

Full Name (Last, First, Middle Initial)
EARL E GJELDE

Mailing Address 790 ROSE ACRES CT

City State Zip Code
LOVELAND CO 80537

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

Name of Employer Occupation
SUMMIT POWER GROUP INC CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.82846

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1475.00

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 46 / 229
(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. Full Name (Last, First, Middle Initial)
DENNIS A GOLDENMAN
Mailing Address 2016 18TH AVE
City MONROE State WI Zip Code 53566
FEC ID number of contributing federal political committee. **C**
Name of Employer THE SWISS COLONY INC Occupation ACCOUNTANT
Receipt For: 2008 Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 11 / 23 / 2007
Transaction ID: SA11AI.81881
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
MRS SUSAN R GORDON
Mailing Address 1212 NW 12TH ST
City ANDREWS State TX Zip Code 79714
FEC ID number of contributing federal political committee. **C**
Name of Employer BRIAN E GORDON, MD Occupation BOOKKEEPER
Receipt For: 2008 Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 08 / 03 / 2007
Transaction ID: SA11AI.82776
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
MRS SUSAN R GORDON
Mailing Address 1212 NW 12TH ST
City ANDREWS State TX Zip Code 79714
FEC ID number of contributing federal political committee. **C**
Name of Employer BRIAN E GORDON, MD Occupation BOOKKEEPER
Receipt For: 2008 Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 11 / 12 / 2007
Transaction ID: SA11AI.82777
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 700.00
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 47 / 229
(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)
PAUL J GROSSKREUZ

Mailing Address 6868 NORTHVUE CT

City WEST BEND State WI Zip Code 53090

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

Name of Employer QUAD TECH Occupation ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 11 / 2007
Transaction ID: SA11AI.81862
 Amount of Each Receipt this Period 200.00

B.

Full Name (Last, First, Middle Initial)
MR ROBERT N GROVE

Mailing Address 75 ROYAL TERN CT

City GEORGETOWN State SC Zip Code 29440

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

Name of Employer M A I Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 19 / 2007
Transaction ID: SA11AI.80882
 Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
MRS CARL W GUSTKE

Mailing Address 233 STATON RD

City CABOT State AR Zip Code 72023

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

Name of Employer FEDERAL EX - (WIFE) REBSA-MEN R H Occupation PILOT - WIFE DEBORAH-RN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2007
Transaction ID: SA11AI.82451
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 350.00

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 48 / 229
	<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 CARL W GUSTKE	Date of Receipt MM / DD / YYYY 11 / 07 / 2007
	Mailing Address 233 STATON RD	Transaction ID: SA11AI.82452
	City State Zip Code CABOT AR 72023	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation FEDERAL EX - (WIFE) REBSA-MEN R H PILOT - WIFE DEBORAH-RN Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00	

B.	Full Name (Last, First, Middle Initial) MRS CARL W GUSTKE	Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 233 STATON RD	Transaction ID: SA11AI.82453
	City State Zip Code CABOT AR 72023	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation FEDERAL EX - (WIFE) REBSA-MEN R H PILOT - WIFE DEBORAH-RN Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00	

C.	Full Name (Last, First, Middle Initial) MRS SHERRY HANCOCK	Date of Receipt MM / DD / YYYY 10 / 15 / 2007
	Mailing Address CMR 445 BOX 278	Transaction ID: SA11AI.80375
	City State Zip Code APO- AE NY 09046	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation DODDS NURSE Receipt For: 2008 <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)	▶	1100.00
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 49 / 229
(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 SHERRY HANCOCK

Mailing Address CMR 445 BOX 278

City State Zip Code
APO- AE NY 09046

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

Name of Employer Occupation
DODDS NURSE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2007

Transaction ID: SA11AI.80376

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MRS SHERRY HANCOCK

Mailing Address CMR 445 BOX 278

City State Zip Code
APO- AE NY 09046

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

Name of Employer Occupation
DODDS NURSE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
12 / 17 / 2007

Transaction ID: SA11AI.80377

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
MR GARY HANSEN

Mailing Address 1604 NORTH HWY 14

City State Zip Code
AURORA NE 68818

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

Name of Employer Occupation
SELF INTERNET RETAIL

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
10 / 08 / 2007

Transaction ID: SA11AI.82387

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **175.00**

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 50 / 229

(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 GARY HANSEN

Mailing Address 1604 NORTH HWY 14

City State Zip Code
AURORA NE 68818

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

Name of Employer Occupation
SELF INTERNET RETAIL

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.82388

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
MR MARK A HARMON

Mailing Address 1516 HIGH MEADOW LN

City State Zip Code
MECHANICSBURG PA 17055

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

Name of Employer Occupation
INFO REQUESTED, NOT RECD HUMAN SERVICES

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.80522

Amount of Each Receipt this Period
460.00

C.

Full Name (Last, First, Middle Initial)
Mr. S B HARPER

Mailing Address 6101 PRYOR LN

City State Zip Code
FARMINGTON NM 87402

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

Name of Employer Occupation
FOUR STATES GASKET & RUBBER IN HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
797.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.83018

Amount of Each Receipt this Period
797.00

SUBTOTAL of Receipts This Page (optional)

1287.00

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 51 / 229

(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)
CHARLES W HARRISON

Mailing Address 58 FERRY RD

City State Zip Code
STOCKTON NJ 08559

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	7

Transaction ID: SA11AI.80369

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
MRS SHARON A HARSHMAN

Mailing Address RR 1 BOX 27

City State Zip Code
CEDAR POINT KS 66843

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

Name of Employer Occupation
HARSHMAN CONSTRUCTION LLC HEAVY CONSTRUCTION

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	7

Transaction ID: SA11AI.82341

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
DR JOHN HARTFORD

Mailing Address 3644 TERRA GRANADA DR APT 2A

City State Zip Code
WALNUT CREEK CA 94595

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	6		2	0	0	7

Transaction ID: SA11AI.83388

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

2100.00

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: (check only one)	PAGE 52 / 229
	<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 C HAYES

Mailing Address 1176 ASHEFORD GREEN AVE

City State Zip Code
CONCORD NC 28027

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

Name of Employer Occupation
FEDERAL GOVERNMENT US CONGRESSMAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
12 / 18 / 2007

Transaction ID: SA11AI.80803

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
MS M SANDRA HEA

Mailing Address 5924 CHILDREDD AVENUE

City State Zip Code
SAINT LOUIS MO 63109

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

Name of Employer Occupation
SELF EMPLOYED REALTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2007

Transaction ID: SA11AI.82272

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
MS M SANDRA HEA

Mailing Address 5924 CHILDREDD AVENUE

City State Zip Code
SAINT LOUIS MO 63109

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

Name of Employer Occupation
SELF EMPLOYED REALTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
12 / 05 / 2007

Transaction ID: SA11AI.82273

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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 53 / 229
(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)
GREGG P HEALEY

Mailing Address 61 E MEADOW RD

City State Zip Code
WILTON CT 06897

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2007

Transaction ID: SA11AI.80338

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
MR BONNIE M HEATH, III

Mailing Address 7145 NW 125TH ST RD

City State Zip Code
REDDICK FL 32686

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

Name of Employer Occupation
BONNIE HEATH FARM LLC THOROUGHBRED HORSE FRAM

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 08 / 2007

Transaction ID: SA11AI.81065

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
MR DALE HEDRICK

Mailing Address 2200 CENTREPARK WEST DR #100

City State Zip Code
WEST PALM BEACH FL 33405

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

Name of Employer Occupation
HEDRICK BROTHERS GENERAL CONTROLTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 07 / 2007

Transaction ID: SA11AI.81097

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **3300.00**

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 54 / 229
(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. Full Name (Last, First, Middle Initial)
MR WILLIAM HELMS

Mailing Address 6409 WYNWOOD PL

City State Zip Code
MONTGOMERY AL 36117

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

Name of Employer Occupation
HELMS-ROARK INC REAL ESTATE DEVELOPMENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	0	7

Transaction ID: SA11AI.81186

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR BRUCE T HENDERSON, MD

Mailing Address 3730 BURNING TREE DR

City State Zip Code
BLOOMFIELD MI 48302

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

Name of Employer Occupation
MD MD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: SA11AI.81603

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR BRUCE T HENDERSON, MD

Mailing Address 3730 BURNING TREE DR

City State Zip Code
BLOOMFIELD MI 48302

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

Name of Employer Occupation
MD MD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	7

Transaction ID: SA11AI.81604

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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 55 / 229
(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. Full Name (Last, First, Middle Initial)
MR JOHN HENDRY

Mailing Address 4537 TIMBERVIEW DR

City State Zip Code
PLANO TX 75093

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	0	7

Transaction ID: SA11AI.82547

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR LAURA D HENRY

Mailing Address 2495 DELLWOOD DR

City State Zip Code
ATLANTA GA 30305

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

Name of Employer Occupation
GEORGIA SIGN CO VICE PRESIDENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	0	7

Transaction ID: SA11AI.80982

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MRS. SHARON HERSCHEND

Mailing Address 1144 LAKESIDE DR

City State Zip Code
BRANSON MO 65616

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

Name of Employer Occupation
SELF-HERSCHEND FAM ENTRTA-
JNMNT THEME PARK OWNER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	9	/	2	0	0	7

Transaction ID: SA11AI.82316

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1700.00**

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 56 / 229
(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. Full Name (Last, First, Middle Initial)
MRS BABETTE HILL

Mailing Address 157 NE COAL LN

City State Zip Code
TRENTON MO 64683

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

Name of Employer HOME Occupation FAMILY MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 04 / 2007

Transaction ID: SA11AI.82304

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
MRS BABETTE HILL

Mailing Address 157 NE COAL LN

City State Zip Code
TRENTON MO 64683

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

Name of Employer HOME Occupation FAMILY MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2007

Transaction ID: SA11AI.82305

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
JAXN HILL

Mailing Address PO BOX 7978

City State Zip Code
THE WOODLANDS TX 77387

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

Name of Employer BBS Occupation WRITER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 02 / 2007

Transaction ID: SA11AI.82667

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **625.00**

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 57 / 229
	<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) JAXN HILL		Date of Receipt
	Mailing Address PO BOX 7978		<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 1 2 / 2 0 / 2 0 0 7
	City	State	Zip Code
	THE WOODLANDS	TX	77387
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.82656
Name of Employer BBS		Occupation WRITER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 250.00	

B.	Full Name (Last, First, Middle Initial) JAXN HILL		Date of Receipt
	Mailing Address PO BOX 7978		<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 1 2 / 3 1 / 2 0 0 7
	City	State	Zip Code
	THE WOODLANDS	TX	77387
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.82668
Name of Employer BBS		Occupation WRITER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 110.00
		<input type="text"/> 360.00	

C.	Full Name (Last, First, Middle Initial) MRS ELEANOR HOFFMAN		Date of Receipt
	Mailing Address 6775 W 800N		<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 1 1 / 0 5 / 2 0 0 7
	City	State	Zip Code
	DEMOTTE	IN	46310
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.81512
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <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"/> 700.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 635.00
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 58 / 229

(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 VALEREE S HOFFMAN

Mailing Address 3309 KIMBERLY WAY

City State Zip Code
SAN MATEO CA 94403

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: SA11AI.83367

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
MR ALAN HOKANSON

Mailing Address 152 GRANDE VISTA WAY

City State Zip Code
CHELSEA AL 35043

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

Name of Employer Occupation
BIOHORIZONS IMPLANT SYSTE- MS INC VP OPERATIONS

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.81147

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
MR MARK A HOLMES

Mailing Address 6035 S VIVIAN ST

City State Zip Code
LITTLETON CO 80127

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

Name of Employer Occupation
BAMBRO BCT INC REGULATORY AFFAIRS

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.82792

Amount of Each Receipt this Period

800.00

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: PAGE 59 / 229

(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 J THOMAS HOLTON

Mailing Address 402 OFFICE PARK DR STE100

City State Zip Code
BIRMINGHAM AL 35223

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.81156

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
MR ANDREW J HORNER

Mailing Address 13 DOWNS LAKE CIR

City State Zip Code
DALLAS TX 75230

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

Name of Employer Occupation
PDI CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.82569

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
MR TIM HORNER

Mailing Address 5500 MAHOGANY RUN CT

City State Zip Code
PLANO TX 75093

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

Name of Employer Occupation
PREMIER MTG CO INC PRESIDENT/OWNER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.82548

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5700.00

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 60 / 229

(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 PAUL R HOULE, II

Mailing Address 320 PENINSULA PT

City State Zip Code
CANTON GA 30115

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

Name of Employer Occupation
PROCURI INC VP PROF SERV

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	7

Transaction ID: SA11AI.80950

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
MRS CYNTHIA HUENPFINER

Mailing Address 525 JACK LEG LN

City State Zip Code
BOZEMAN MT 59715

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

Name of Employer Occupation
DICK WALTER AUTO CENTER SECRETARY/BOOKKEEPER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	0	7

Transaction ID: SA11AI.82098

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MRS CYNTHIA HUENPFINER

Mailing Address 525 JACK LEG LN

City State Zip Code
BOZEMAN MT 59715

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

Name of Employer Occupation
DICK WALTER AUTO CENTER SECRETARY/BOOKKEEPER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	0	7

Transaction ID: SA11AI.82099

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) ▶

500.00

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 61 / 229
(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 CYNTHIA HUEMPFINER

Mailing Address 525 JACK LEG LN

City State Zip Code
BOZEMAN MT 59715

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

Name of Employer Occupation
DICK WALTER AUTO CENTER SECRETARY/BOOKKEEPER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 18 / 2007

Transaction ID: SA11AI.82100

Amount of Each Receipt this Period
400.00

B.

Full Name (Last, First, Middle Initial)
SUSAN HUMPHRIES

Mailing Address 8 SAGEBRUSH

City State Zip Code
HOT SPRINGS KS 67230

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 01 / 2007

Transaction ID: SA11AI.82357

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
DR CURTIS R IMEL

Mailing Address 9 COUNTRYSIDE AVE

City State Zip Code
OTTAWA IL 61350

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

Name of Employer Occupation
SELF EMPLOYED ORTHRODONTIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 21 / 2007

Transaction ID: SA11AI.82207

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1900.00**

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 62 / 229
	<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 JAMES M JACKSON		Date of Receipt MM / DD / YYYY 10 / 03 / 2007
Mailing Address P O BOX 2020		Transaction ID: SA11AI.82689
City SOUR LAKE	State TX	Zip Code 77659
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer F J BROWN & ASSOC HOUSTON TX	Occupation RETIRED	
Receipt For: 2008 <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) MR JAMES M JACKSON		Date of Receipt MM / DD / YYYY 12 / 26 / 2007
Mailing Address P O BOX 2020		Transaction ID: SA11AI.82690
City SOUR LAKE	State TX	Zip Code 77659
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer F J BROWN & ASSOC HOUSTON TX	Occupation RETIRED	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) MR JEFFREY L JACOBS		Date of Receipt MM / DD / YYYY 12 / 10 / 2007
Mailing Address 1200 CONNELL RD		Transaction ID: SA11AI.81637
City ORTINVILLE	State MI	Zip Code 48462
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF EMPLOYED	Occupation INSURANCE SALES	
Receipt For: 2008 <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)	750.00
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 63 / 229
(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 LORENA JAEB

Mailing Address PO BOX 428

City MANGO State FL Zip Code 33550

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt: MM / DD / YYYY
11 / 02 / 2007

Transaction ID: SA11AI.81114

Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
MRS ARLENE JOHNSON

Mailing Address 4512 BRENDA DR

City FLOWER MOUND State TX Zip Code 75022

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: MM / DD / YYYY
09 / 13 / 2007

Transaction ID: SA11AI.82507

Amount of Each Receipt this Period: 230.00

C.

Full Name (Last, First, Middle Initial)
GREGORY S JOHNSON

Mailing Address 43449 ELK RUN

City STEAMBOAD SPRINGS State CO Zip Code 80487

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
12 / 31 / 2007

Transaction ID: SA11AI.82830

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **980.00**

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 64 / 229
(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. Full Name (Last, First, Middle Initial)
MR DAVID JORGENSON

Mailing Address 6620 N CALLE LOMITA

City State Zip Code
TUCSON AZ 85704

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

Name of Employer Occupation
CORBAN ENTERPRISES INC GENERAL CONTRACTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.82996

Amount of Each Receipt this Period
500.00

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
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.81777

Amount of Each Receipt this Period
100.00

C. 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
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.81778

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

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 65 / 229
(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. 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
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	9	/	2	0	0	7

Transaction ID: SA11AI.81779

Amount of Each Receipt this Period
100.00

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
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.81780

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DR JOHN D KEISLING

Mailing Address 35 ERICA LN

City State Zip Code
BELEN NM 87002

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

Name of Employer Occupation
SAIC SCIENTIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	7

Transaction ID: SA11AI.83012

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **220.00**

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 66 / 229
(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)
DR JOHN D KEISLING

Mailing Address 35 ERICA LN

City BELEN State NM Zip Code 87002

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

Name of Employer SAIC Occupation SCIENTIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt 12 / 20 / 2007

Transaction ID: SA11AI.83013

Amount of Each Receipt this Period 200.00

B.

Full Name (Last, First, Middle Initial)
MR GUY KEITH

Mailing Address 4195 VIKING WAY #150

City LONG BEACH State CA Zip Code 90808

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

Name of Employer APMC Occupation SALES

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 28 / 2007

Transaction ID: SA11AI.83082

Amount of Each Receipt this Period 500.00

C.

Full Name (Last, First, Middle Initial)
MR H KERKSTRA

Mailing Address 1711 TOURS CT

City BAKERSFIELD State CA Zip Code 93311

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 07 / 09 / 2007

Transaction ID: SA11AI.83341

Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional) ► **760.00**

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 67 / 229
(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. Full Name (Last, First, Middle Initial)
MR H KERKSTRA

Mailing Address 1711 TOURS CT

City BAKERSFIELD State CA Zip Code 93311

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 08 / 10 / 2007
Transaction ID: SA11AI.83342
 Amount of Each Receipt this Period 60.00

B. Full Name (Last, First, Middle Initial)
MR H KERKSTRA

Mailing Address 1711 TOURS CT

City BAKERSFIELD State CA Zip Code 93311

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 09 / 11 / 2007
Transaction ID: SA11AI.83343
 Amount of Each Receipt this Period 60.00

C. Full Name (Last, First, Middle Initial)
MR H KERKSTRA

Mailing Address 1711 TOURS CT

City BAKERSFIELD State CA Zip Code 93311

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 11 / 14 / 2007
Transaction ID: SA11AI.83344
 Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional) ► 180.00

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 68 / 229
	<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 H KERKSTRA		Date of Receipt MM / DD / YYYY 12 / 17 / 2007		
	Mailing Address 1711 TOURS CT		Transaction ID: SA11AI.83345		
	City BAKERSFIELD	State CA	Zip Code 93311	Amount of Each Receipt this Period 60.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer RETIRED	Occupation RETIRED			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

B.	Full Name (Last, First, Middle Initial) MR HERMAN KESTERKE		Date of Receipt MM / DD / YYYY 11 / 19 / 2007		
	Mailing Address 2215 E MAIN AVE		Transaction ID: SA11AI.82068		
	City BISMARCK	State ND	Zip Code 58501	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer SELF EMPLOYED	Occupation MESSAGE THERAPIST			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

C.	Full Name (Last, First, Middle Initial) MRS DEBORAH KEUER		Date of Receipt MM / DD / YYYY 09 / 11 / 2007		
	Mailing Address 2025 HILLTOP DR		Transaction ID: SA11AI.82582		
	City TYLER	State TX	Zip Code 75701	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer SELF	Occupation HOMEMAKER			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00			

SUBTOTAL of Receipts This Page (optional)	▶	435.00
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 69 / 229
	<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 JACK KNAPP		Date of Receipt
	Mailing Address 2800 PIN OAK LN		<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
	SANDSTON	VA	23150
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80726
Name of Employer VA ASSEMBLY OF 2ND BAPTIST		Occupation EX DIRECTOR	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 400.00	

B.	Full Name (Last, First, Middle Initial) MR JACK KNAPP		Date of Receipt
	Mailing Address 2800 PIN OAK LN		<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
	SANDSTON	VA	23150
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80727
Name of Employer VA ASSEMBLY OF 2ND BAPTIST		Occupation EX DIRECTOR	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 500.00	

C.	Full Name (Last, First, Middle Initial) MS LUCY N KNAPP		Date of Receipt
	Mailing Address 1798 CAMTON 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
	EUREKA	CA	95503
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.83437
Name of Employer H&R BLOCK		Occupation TAX PREPARER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 300.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 300.00
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 70 / 229

(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 KENNETH D KONING

Mailing Address 10950 S BURKETT RD

City State Zip Code
MC BAIN MI 49657

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

Name of Employer
CALVIN CHRISTIAN REFORMED CHUR

Occupation
PASTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 26 / 2007

Transaction ID: SA11AI.81758

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
MR TYLER A KORFHAGE

Mailing Address 2717 GARFIELD AVE NW

City State Zip Code
GRAND RAPIDS MI 49544

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

Name of Employer
MOL BELTING CO

Occupation
MANAGEMENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 10 / 2007

Transaction ID: SA11AI.81746

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
MRS PAULINE H KREIDER

Mailing Address 760 HOSTETTER RD

City State Zip Code
MANHEIM PA 17545

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

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 27 / 2007

Transaction ID: SA11AI.80542

Amount of Each Receipt this Period

300.00

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 71 / 229
(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. Full Name (Last, First, Middle Initial)
MRS PAULINE H KREIDER
 Mailing Address 760 HOSTETTER RD
 City State Zip Code
 MANHEIM PA 17545
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 5 / 2 0 0 7
Transaction ID: SA11AI.80543
 Amount of Each Receipt this Period
 200.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

B. Full Name (Last, First, Middle Initial)
FRANK H KRUEGER
 Mailing Address 3334 WENTWORTH WAY
 City State Zip Code
 JAMUL CA 91935
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 2 / 2 0 0 7
Transaction ID: SA11AI.83116
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DOLLNAN MORTGAGE MGR
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

C. Full Name (Last, First, Middle Initial)
MRS THOMAS J KUK
 Mailing Address 32265 WEEPING WILLOW ST
 City State Zip Code
 TRABUCO CANYON CA 92679
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 8 / 2 0 0 7
Transaction ID: SA11AI.83250
 Amount of Each Receipt this Period
 150.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

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: (check only one)	PAGE 72 / 229
	<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 THOMAS J KUK		Date of Receipt MM / DD / YYYY 11 / 02 / 2007
Mailing Address 32265 WEEPING WILLOW ST		Transaction ID: SA11AI.83251
City	State	Zip Code
TRABUCO CANYON	CA	92679
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) MRS THOMAS J KUK		Date of Receipt MM / DD / YYYY 11 / 02 / 2007
Mailing Address 32265 WEEPING WILLOW ST		Transaction ID: SA11AI.83252
City	State	Zip Code
TRABUCO CANYON	CA	92679
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

C.

Full Name (Last, First, Middle Initial) MRS THOMAS J KUK		Date of Receipt MM / DD / YYYY 11 / 27 / 2007
Mailing Address 32265 WEEPING WILLOW ST		Transaction ID: SA11AI.83253
City	State	Zip Code
TRABUCO CANYON	CA	92679
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional)	450.00
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 73 / 229

(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 LAFLEUR

Mailing Address 2401 OKEMOS DR SE

City State Zip Code
GRAND RAPIDS MI 49506

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

Name of Employer Occupation
EMERGENCY CARE SPECIALIST PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 26 / 2007

Transaction ID: SA11AI.81722

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
MS MARIA LAINE

Mailing Address 4259 CONQUISTADOR

City State Zip Code
OCEANSIDE CA 92056

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

Name of Employer Occupation
HOUSEWIFE HOUSEWIFE

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 05 / 2007

Transaction ID: SA11AI.83142

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)
MR ROBERT LAKE

Mailing Address 2721 18TH ST

City State Zip Code
BAKERSFIELD CA 93301

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 01 / 2007

Transaction ID: SA11AI.83334

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1070.00

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 74 / 229
	<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 ROBERT LAKE

Mailing Address 2721 18TH ST

City BAKERSFIELD State CA Zip Code 93301

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 11 / 2007
Transaction ID: SA11AI.83335
 Amount of Each Receipt this Period: 50.00

B.

Full Name (Last, First, Middle Initial)
MR ROBERT LAKE

Mailing Address 2721 18TH ST

City BAKERSFIELD State CA Zip Code 93301

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 04 / 2007
Transaction ID: SA11AI.83336
 Amount of Each Receipt this Period: 50.00

C.

Full Name (Last, First, Middle Initial)
MR ROBERT LAKE

Mailing Address 2721 18TH ST

City BAKERSFIELD State CA Zip Code 93301

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 02 / 2007
Transaction ID: SA11AI.83337
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 75 / 229

(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 LAKE

Mailing Address 2721 18TH ST

City State Zip Code
BAKERSFIELD CA 93301

FEC ID number of contributing federal political committee. C

Name of Employer
INFO REQUESTED, NOT RECD

Occupation
INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 10 / 2007

Transaction ID: SA11AI.83338

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MR ROBERT LAKE

Mailing Address 2721 18TH ST

City State Zip Code
BAKERSFIELD CA 93301

FEC ID number of contributing federal political committee. C

Name of Employer
INFO REQUESTED, NOT RECD

Occupation
INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2007

Transaction ID: SA11AI.83339

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
MR J SMITH LANIER, II

Mailing Address PO BOX 70

City State Zip Code
WEST POINT GA 31833

FEC ID number of contributing federal political committee. C

Name of Employer
J SMITH LANIER & CO

Occupation
CHMN & CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: SA11AI.81028

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) 400.00

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 76 / 229
	<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 GLENN G LARSON		Date of Receipt
Mailing Address 8950 235TH ST N		<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 FOREST LAKE MN 55025		<input type="text"/> 1 1 / <input type="text"/> 1 4 / <input type="text"/> 2 0 0 7
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: SA11AI.81938
Name of Employer Occupation WHOLESALE PRODUCE SUPPLY TRUCKING		Amount of Each Receipt this Period
Receipt For: 2008 <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) BRUCE C LEE		Date of Receipt
Mailing Address 970 ISOM 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 SAN ANTONIO TX 78216		<input type="text"/> 0 8 / <input type="text"/> 2 8 / <input type="text"/> 2 0 0 7
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: SA11AI.82704
Name of Employer Occupation INFO REQUESTED, NOT RECD INFO REQUESTED- NOT RECD		Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 500.00
Aggregate Year-to-Date ▼ <input type="text"/> 500.00		

C.

Full Name (Last, First, Middle Initial) BRUCE C LEE		Date of Receipt
Mailing Address 970 ISOM 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 SAN ANTONIO TX 78216		<input type="text"/> 1 2 / <input type="text"/> 1 0 / <input type="text"/> 2 0 0 7
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: SA11AI.82705
Name of Employer Occupation INFO REQUESTED, NOT RECD INFO REQUESTED- NOT RECD		Amount of Each Receipt this Period
Receipt For: 2008 <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"/> 750.00		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1050.00
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 77 / 229

(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 JOHN R LEMMONS

Mailing Address 1973 ROSE VALLEY RD

City State Zip Code
KELSO WA 98626

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

Name of Employer Occupation
PACIFIC FIBRE PRODUCTS INC EXECUTIVE

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 23 / 2007

Transaction ID: SA11AI.83717

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
BILL LEONARD

Mailing Address 6100 LAKE FORREST DR SUITE 530

City State Zip Code
ATLANTA GA 30328

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

Name of Employer Occupation
WM LEONARD & CO REAL ESTATE

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 08 / 2007

Transaction ID: SA11AI.80984

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
DR JACK W LESCH

Mailing Address 34 SILVERTRAND PL

City State Zip Code
SPRING TX 77381

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

Name of Employer Occupation
WOODLANDS FAMILY PRACTICE PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 31 / 2007

Transaction ID: SA11AI.82664

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2000.00

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 78 / 229
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
RICHARD A LINBERG

Mailing Address PO BOX 797766

City State Zip Code
DALLAS TX 75379

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2007

Transaction ID: SA11AI.82574

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MRS STACY LINDAUER

Mailing Address 762 W 8TH STREET

City State Zip Code
JASPER IN 47546

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2007

Transaction ID: SA11AI.81568

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MRS STACY LINDAUER

Mailing Address 762 W 8TH STREET

City State Zip Code
JASPER IN 47546

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
12 / 18 / 2007

Transaction ID: SA11AI.81569

Amount of Each Receipt this Period
25.00

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: (check only one)	PAGE 79 / 229
	<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 RICHARD A LINDBERG

Mailing Address PO BOX 797766

City State Zip Code
DALLAS TX 75379

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

Name of Employer SELF Occupation INVESTMENTS

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2007

Transaction ID: SA11AI.82575

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
MRS JOAN ANNE LINDSEY

Mailing Address 36 HAMMOND DR

City State Zip Code
SANTA BARBARA CA 93108

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2007

Transaction ID: SA11AI.83326

Amount of Each Receipt this Period
5000.00

C.

Full Name (Last, First, Middle Initial)
STEVE LIPPERT

Mailing Address 6829 JENNIFER LYNN DR

City State Zip Code
CINCINNATI OH 45248

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

Name of Employer HAMILTON CASTER & MFG CO Occupation BUSINESS

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 08 / 2007

Transaction ID: SA11AI.81419

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **6500.00**

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 80 / 229

(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)
STEVE LIPPERT

Mailing Address 6829 JENNIFER LYNN DR

City State Zip Code
CINCINNATI OH 45248

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

Name of Employer Occupation
HAMILTON CASTER & MFG CO BUSINESS

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	8		2	0	0	7

Transaction ID: SA11AI.81420

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
MR DAVID W LOZIER, JR

Mailing Address 7420 WESTERFIELD RD

City State Zip Code
LYNDEN WA 98264

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

Name of Employer Occupation
SELF LOZIER HOMES CORP

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	7		2	0	0	7

Transaction ID: SA11AI.83647

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
MR JAMES P LUKE

Mailing Address 4273 BRISTOL DR

City State Zip Code
DAYTON OH 45440

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	7

Transaction ID: SA11AI.81448

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

6050.00

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 81 / 229
(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. Full Name (Last, First, Middle Initial)
MR JAMES P LUKE

Mailing Address 4273 BRISTOL DR

City State Zip Code
DAYTON OH 45440

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	7	/	2	0	0	7

Transaction ID: SA11AI.81449

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR HUGH O MACLELLAN, JR

Mailing Address 200 W FLEETWOOD DR

City State Zip Code
LOOKOUT MTN TN 37350

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

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.81234

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Dr. TIMOTHY J MAKATCHE

Mailing Address 5 TWIN OAK DR

City State Zip Code
LEESPORT PA 19533

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

Name of Employer Occupation
SCHUYLKILL VALLEY FAMILY PRACT PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.80585

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► **950.00**

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 82 / 229

(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 MARILYN H MARKHAM

Mailing Address 350 HEIDI CT

City State Zip Code
MORGAN HILL CA 95037

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

Name of Employer Occupation
MORGAN HILL, PA. MUSIC TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	0		2	0	0	7

Transaction ID: SA11AI.83397

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MRS ANN MARLBOROUGH

Mailing Address 1330 OLYMPIC ST

City State Zip Code
SPRINGFIELD OR 97477

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

Name of Employer Occupation
SHMC NURSE AIDE

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	0	7

Transaction ID: SA11AI.83569

Amount of Each Receipt this Period

135.00

C.

Full Name (Last, First, Middle Initial)

MRS ANN MARLBOROUGH

Mailing Address 1330 OLYMPIC ST

City State Zip Code
SPRINGFIELD OR 97477

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

Name of Employer Occupation
SHMC NURSE AIDE

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	3		2	0	0	7

Transaction ID: SA11AI.83570

Amount of Each Receipt this Period

205.00

SUBTOTAL of Receipts This Page (optional)

640.00

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 83 / 229
	(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 JAMES MATHEW		Date of Receipt	
	Mailing Address 10576 DASON DR		M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.82928
	BOISE	ID	83704	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer MICRON TECHNOLOGY		Occupation ENGINEER		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

B.	Full Name (Last, First, Middle Initial) MR RAY MATTHEWS		Date of Receipt	
	Mailing Address 2700 SEVEN MILE WAY SE		M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.83545
	ALBANY	OR	97322	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer WAH CHANG		Occupation CALIBRATION TECHNICIAN		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 815.00		

C.	Full Name (Last, First, Middle Initial) MRS LYNN MCCLATCHEY		Date of Receipt	
	Mailing Address 45012 70TH AVENUE		M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.81802
	LINN GROVE	IA	51033	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		20.00	
Name of Employer SIOUX CENTRAL SCHOOL		Occupation TEACHER		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional)	370.00
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 84 / 229
(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. Full Name (Last, First, Middle Initial)
MRS LYNN MCCLATCHEY

Mailing Address 45012 70TH AVENUE

City State Zip Code
LINN GROVE IA 51033

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

Name of Employer Occupation
SIOUX CENTRAL SCHOOL TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.81803

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
MRS LYNN MCCLATCHEY

Mailing Address 45012 70TH AVENUE

City State Zip Code
LINN GROVE IA 51033

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

Name of Employer Occupation
SIOUX CENTRAL SCHOOL TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.81804

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
MRS LYNN MCCLATCHEY

Mailing Address 45012 70TH AVENUE

City State Zip Code
LINN GROVE IA 51033

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

Name of Employer Occupation
SIOUX CENTRAL SCHOOL TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.81805

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **60.00**

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 85 / 229
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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 LYNN MCCLATCHEY		Date of Receipt
	Mailing Address 45012 70TH AVENUE		<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
	LINN GROVE	IA	51033
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer SIOUX CENTRAL SCHOOL		Occupation TEACHER	Transaction ID: SA11AI.81806
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 320.00	<input type="text"/> 20.00

B.	Full Name (Last, First, Middle Initial) MRS LYNN MCCLATCHEY		Date of Receipt
	Mailing Address 45012 70TH AVENUE		<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
	LINN GROVE	IA	51033
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer SIOUX CENTRAL SCHOOL		Occupation TEACHER	Transaction ID: SA11AI.81807
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 340.00	<input type="text"/> 20.00

C.	Full Name (Last, First, Middle Initial) Mr. MICHAEL D MCCOLLUM		Date of Receipt
	Mailing Address 10196 CLOVER RANCH 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
	SACRAMENTO	CA	95829
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer SELF		Occupation LAND USE CONSULTANT	Transaction ID: SA11AI.83464
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 1150.00	<input type="text"/> 1000.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1040.00
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 86 / 229
(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)
MAE MCKINLEY

Mailing Address 515 11TH AVE NE

City MINOT State ND Zip Code 58703

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 08 / 09 / 2007
Transaction ID: SA11AI.82074
 Amount of Each Receipt this Period: 30.00

B.

Full Name (Last, First, Middle Initial)
MAE MCKINLEY

Mailing Address 515 11TH AVE NE

City MINOT State ND Zip Code 58703

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 08 / 2007
Transaction ID: SA11AI.82075
 Amount of Each Receipt this Period: 50.00

C.

Full Name (Last, First, Middle Initial)
MR MICHAEL W MCTAE

Mailing Address 4710 PAULA WAY

City FAIR OAKS State CA Zip Code 95628

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

Name of Employer SACRAMENTO MUNICIPAL UTILITY DISTRICT Occupation ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1653.00

Date of Receipt: 09 / 26 / 2007
Transaction ID: SA11AI.83441
 Amount of Each Receipt this Period: 1653.00

SUBTOTAL of Receipts This Page (optional) ► **1733.00**

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 87 / 229

(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 DAVID MEHL

Mailing Address 7598 N SECRET CANYON DR

City State Zip Code
TUCSON AZ 85718

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

Name of Employer Occupation
COTTONWOOD PROPERTIES BUSINESS OWNER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.82999

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
MR CALVIN D MEINDERS

Mailing Address 1240 170TH ST

City State Zip Code
PELLA IA 50219

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

Name of Employer Occupation
VERMEER MANUFACTURING ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.81770

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
MR MELVYN MICHAELIAN

Mailing Address 2078 RANCHO LAS PALMAS DR

City State Zip Code
FALLBROOK CA 92028

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

Name of Employer Occupation
FALLBROOK CA PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.83129

Amount of Each Receipt this Period

50.00

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 88 / 229
(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 ZINA MICHAJLECZENK

Mailing Address 330 WEST 56TH STREET APT #16A

City State Zip Code
NEW YORK NY 10019

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

Name of Employer
INFO REQUESTED, NOT RECD

Occupation
INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2007

Transaction ID: SA11AI.80384

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
MR STUART MIGDON

Mailing Address 1909 JOSEPH CT

City State Zip Code
WALL NJ 07719

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

Name of Employer
SELF

Occupation
ATTORNEY

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
MM / DD / YYYY
11 / 14 / 2007

Transaction ID: SA11AI.80357

Amount of Each Receipt this Period
3000.00

C.

Full Name (Last, First, Middle Initial)
MR LESLIE A MILLER

Mailing Address 1821 E CALLE DEL VASO

City State Zip Code
ORO VALLEY AZ 85737

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

Name of Employer
CONCEPT 100 REALTY

Occupation
HOUSEWIFE /REALTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
12 / 20 / 2007

Transaction ID: SA11AI.83002

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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 89 / 229

(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 MARY L MILLER

Mailing Address 584 CHURCH ST

City State Zip Code
LANDISVILLE PA 17538

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

Name of Employer Occupation
HOMEMAKER SECRETARY/BOOKKEEPER/HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.80538

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
DR JOHN M MILLIGAN

Mailing Address 4135 N 49TH WAY

City State Zip Code
PHOENIX AZ 85018

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

Name of Employer Occupation
SELF PHYCICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	0	7

Transaction ID: SA11AI.82942

Amount of Each Receipt this Period

375.00

C.

Full Name (Last, First, Middle Initial)
MRS RUTH MIRAGLIA

Mailing Address 1485 TURKEY TRAIL

City State Zip Code
INVERNESS IL 60067

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.82132

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

775.00

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 90 / 229

(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 DON P MORGAN

Mailing Address 2 SILVERBERRY

City State Zip Code
LITTLETON CO 80127

FEC ID number of contributing federal political committee. C

Name of Employer: FACTORY DIRECT SALES CONSULTANT Occupation: SALESMAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
08 / 30 / 2007

Transaction ID: SA11AI.82794

Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
MR DON P MORGAN

Mailing Address 2 SILVERBERRY

City State Zip Code
LITTLETON CO 80127

FEC ID number of contributing federal political committee. C

Name of Employer: FACTORY DIRECT SALES CONSULTANT Occupation: SALESMAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
11 / 07 / 2007

Transaction ID: SA11AI.82795

Amount of Each Receipt this Period 500.00

C.

Full Name (Last, First, Middle Initial)
MR DON P MORGAN

Mailing Address 2 SILVERBERRY

City State Zip Code
LITTLETON CO 80127

FEC ID number of contributing federal political committee. C

Name of Employer: FACTORY DIRECT SALES CONSULTANT Occupation: SALESMAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2007

Transaction ID: SA11AI.82796

Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional) 1400.00

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 91 / 229
(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. Full Name (Last, First, Middle Initial)
DR DAVID MORRISON

Mailing Address 1802 CROOM DR

City State Zip Code
MONTGOMERY AL 36106

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

Name of Employer Occupation
PEDIATRIC HEALTHCARE LLC PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	1	/	2	0	0	7

Transaction ID: SA11AI.81180

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR CONRAD MORSE

Mailing Address 3508 SO VILLAGE DR

City State Zip Code
MEDFORD OR 97504

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

Name of Employer Occupation
CRATER IRON INC GENERAL MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.83571

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MS KAREN MYERS

Mailing Address 61022 STATE ROAD 19

City State Zip Code
ELKHART IN 46517

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	7

Transaction ID: SA11AI.81519

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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 92 / 229
(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 KAREN MYERS

Mailing Address 61022 STATE ROAD 19

City State Zip Code
ELKHART IN 46517

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
470.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.81520

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
TAMMY J NELSON

Mailing Address 8492 N MAPLE COURT

City State Zip Code
ZEELAND MI 49464

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

Name of Employer Occupation
REQUEST FOODS INC/HOME COST ANALYST/HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.81720

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
MRS LORRAINE A NEULAND

Mailing Address 36 ARADO

City State Zip Code
RANCHO SANTA MAR CA 92688

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

Name of Employer Occupation
ATTORNEY NEULAND & NORDBERG

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.83254

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1450.00**

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 93 / 229
(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. Full Name (Last, First, Middle Initial)
MR JOHN E NEWBY

Mailing Address 1131 OVERTON CT

City State Zip Code
NAPERVILLE IL 60540

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

Name of Employer Occupation
HEWLETT PACKARD PROGRAM MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	7	/	2	0	0	7

Transaction ID: SA11AI.82182

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
MR EDWARD M NICHOLS

Mailing Address 555 TAXTER RD

City State Zip Code
ELMSFORD NY 10523

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.80391

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR JOHN Q NICHOLS, JR

Mailing Address 1654 LA JOLLA RANCHO RD

City State Zip Code
LA JOLLA CA 92037

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	8	/	2	0	0	7

Transaction ID: SA11AI.83131

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **450.00**

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 94 / 229
(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. Full Name (Last, First, Middle Initial)
MR JOHN Q NICHOLS, JR

Mailing Address 1654 LA JOLLA RANCHO RD

City State Zip Code
LA JOLLA CA 92037

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	8	/	2	0	0	7

Transaction ID: SA11AI.83132

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR JOHN Q NICHOLS, JR

Mailing Address 1654 LA JOLLA RANCHO RD

City State Zip Code
LA JOLLA CA 92037

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	0	7

Transaction ID: SA11AI.83133

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR JOHN Q NICHOLS, JR

Mailing Address 1654 LA JOLLA RANCHO RD

City State Zip Code
LA JOLLA CA 92037

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	0	7

Transaction ID: SA11AI.83134

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 95 / 229

(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

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 JOHN Q NICHOLS, JR

Mailing Address 1654 LA JOLLA RANCHO RD

City State Zip Code
LA JOLLA CA 92037

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt M M / D D / Y Y Y Y Y
10 / 30 / 2007

Transaction ID: SA11AI.83135

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
MR JOHN Q NICHOLS, JR

Mailing Address 1654 LA JOLLA RANCHO RD

City State Zip Code
LA JOLLA CA 92037

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt M M / D D / Y Y Y Y Y
12 / 20 / 2007

Transaction ID: SA11AI.83136

Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
MR JOHN Q NICHOLS, JR

Mailing Address 1654 LA JOLLA RANCHO RD

City State Zip Code
LA JOLLA CA 92037

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y Y
12 / 28 / 2007

Transaction ID: SA11AI.83137

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 96 / 229
(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. Full Name (Last, First, Middle Initial)
MR A J NITZ

Mailing Address 132 FARMBROOK CIR

City State Zip Code
FRANKFORT KY 40601

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

Name of Employer SELF Occupation PHYSICAL THERAPIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.81316

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR A J NITZ

Mailing Address 132 FARMBROOK CIR

City State Zip Code
FRANKFORT KY 40601

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

Name of Employer SELF Occupation PHYSICAL THERAPIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.81317

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR STEVE NOVARRO

Mailing Address 712 N GARFIELD AVE

City State Zip Code
ALHAMBRA CA 91801

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE INVESTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.83111

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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 97 / 229
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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 CHARLES O'DELL		Date of Receipt MM / DD / YYYY 08 / 20 / 2007
Mailing Address 10803 CRIPPLEGATE RD		Transaction ID: SA11AI.80617
City POTOMAC	State MD	Zip Code 20854
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer MARRIOTT INTERNATIONAL INC	Occupation RETIRED	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) MRS SUSAN P OSBORN		Date of Receipt MM / DD / YYYY 12 / 31 / 2007
Mailing Address 2541 W PALOMINO DR		Transaction ID: SA11AI.82959
City CHANDLER	State AZ	Zip Code 85224
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer INFO REQUESTED, NOT RECD	Occupation HOUSEWIFE & MOTHER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Mr. THOMAS L OSTENSON		Date of Receipt MM / DD / YYYY 07 / 12 / 2007
Mailing Address 1020 LAKE WINDWARD OVERLOOK		Transaction ID: SA11AI.80916
City ALPHARETTA	State GA	Zip Code 30005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer AON CORPORATION	Occupation ATTORNEY	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
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 98 / 229
(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. Full Name (Last, First, Middle Initial)
Mr. THOMAS L OSTENSON

Mailing Address 1020 LAKE WINDWARD OVERLOOK

City State Zip Code
ALPHARETTA GA 30005

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

Name of Employer Occupation
AON CORPORATION ATTORNEY

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.80917

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR JAY R OWEN

Mailing Address 35 CYPRESS MARSH DR

City State Zip Code
HILTON HEAD ISLAND SC 29926

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

Name of Employer Occupation
ENGINEERED SYSTEMS ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	3	/	2	0	0	7

Transaction ID: SA11AI.80913

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR JAY R OWEN

Mailing Address 35 CYPRESS MARSH DR

City State Zip Code
HILTON HEAD ISLAND SC 29926

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

Name of Employer Occupation
ENGINEERED SYSTEMS ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	7	/	2	0	0	7

Transaction ID: SA11AI.80914

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **700.00**

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 99 / 229
(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)
DR ROGER D OWENS

Mailing Address 4425 HIGHLAND RD

City State Zip Code
GAINESVILLE GA 30506

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

Name of Employer SELF Occupation FARMER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2007

Transaction ID: SA11AI.80990

Amount of Each Receipt this Period
2500.00

B.

Full Name (Last, First, Middle Initial)
MRS VIOLA M PANMAN

Mailing Address 1152 CALLE MARIA

City State Zip Code
SAN MARCOS CA 92069

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

Name of Employer HOMEMAKER Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 29 / 2007

Transaction ID: SA11AI.83150

Amount of Each Receipt this Period
400.00

C.

Full Name (Last, First, Middle Initial)
MRS VIOLA M PANMAN

Mailing Address 1152 CALLE MARIA

City State Zip Code
SAN MARCOS CA 92069

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

Name of Employer HOMEMAKER Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
12 / 28 / 2007

Transaction ID: SA11AI.83151

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 2950.00

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 100 / 229
(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)
ALAN M PARK

Mailing Address 2193 RIDGEPOINTE COURT

City State Zip Code
WALNUT CREEK CA 94596

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

Name of Employer Occupation
AT ROAD SALES MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.83391

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
ALAN M PARK

Mailing Address 2193 RIDGEPOINTE COURT

City State Zip Code
WALNUT CREEK CA 94596

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

Name of Employer Occupation
AT ROAD SALES MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.83392

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
MR TERRILL PARKER

Mailing Address 1330 OLD WOODBINE ROAD NE

City State Zip Code
ATLANTA GA 30319

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.80983

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1075.00**

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 101 / 229
(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 MICHAEL L PERRY

Mailing Address 1009 CALLIE CT

City Kingsport State TN Zip Code 37664

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

Name of Employer EASTMAN Occupation CIVIL ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 16 / 2007
Transaction ID: SA11AI.81242
 Amount of Each Receipt this Period: 225.00

B.

Full Name (Last, First, Middle Initial)
MR ROGER A PETREY

Mailing Address 325 KEMPTON ST APT 265

City Spring Valley State CA Zip Code 91977

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 12 / 10 / 2007
Transaction ID: SA11AI.83121
 Amount of Each Receipt this Period: 225.00

C.

Full Name (Last, First, Middle Initial)
MRS NANCY PHARRIS

Mailing Address 130 EL DORADO LANE

City Anaheim State CA Zip Code 92807

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 08 / 24 / 2007
Transaction ID: SA11AI.83275
 Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ► **650.00**

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 102 / 229
(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 NANCY PHARRIS

Mailing Address 130 EL DORADO LANE

City ANAHEIM State CA Zip Code 92807

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

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 19 / 2007
Transaction ID: SA11AI.83276
 Amount of Each Receipt this Period: 200.00

B.

Full Name (Last, First, Middle Initial)
MRS NANCY PHARRIS

Mailing Address 130 EL DORADO LANE

City ANAHEIM State CA Zip Code 92807

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

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 11 / 12 / 2007
Transaction ID: SA11AI.83277
 Amount of Each Receipt this Period: 1000.00

C.

Full Name (Last, First, Middle Initial)
MRS SHERRILL L PHILLIPS

Mailing Address 22950 SUPREME CT

City BEND State OR Zip Code 97702

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

Name of Employer: INFO REQUESTED, NOT RECD Occupation: RET.

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 19 / 2007
Transaction ID: SA11AI.83589
 Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 1700.00

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 103 / 229
(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 GARY L PILGRIM

Mailing Address 121 MINE RD

City MALVERN State PA Zip Code 19355

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt: 12 / 31 / 2007
Transaction ID: SA11AI.80574
Amount of Each Receipt this Period: 3000.00

B.

Full Name (Last, First, Middle Initial)
MR BILLY JOE POSEY

Mailing Address 7409 STALLION CIR

City FLOWER MOUND State TX Zip Code 75022

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

Name of Employer NEC AMERICA Occupation MGR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 31 / 2007
Transaction ID: SA11AI.82508
Amount of Each Receipt this Period: 1000.00

C.

Full Name (Last, First, Middle Initial)
MRS ELIZABETH S POWELL

Mailing Address 10050 WHITE SHOP RD

City CULPEPPER State VA Zip Code 22701

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 31 / 2007
Transaction ID: SA11AI.80709
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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 104 / 229
	<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 KAREN A PRETE		Date of Receipt
	Mailing Address 24383 ALELLA TER		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	LAGUNA NIGUEL	CA	92677
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.83245
Name of Employer MORTGAGE COACH		Occupation HOMEMAKER-HUSBAND IN SOFTWARE SALES	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 205.00	

B.	Full Name (Last, First, Middle Initial) MR ALLEN L PRICE		Date of Receipt
	Mailing Address 1503 FLOYD DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	SAN ANGELO	TX	76904
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.82625
Name of Employer SMITH, ROSE, ETAL		Occupation ATTORNEY	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 1000.00	

C.	Full Name (Last, First, Middle Initial) MRS JAMES T PURSELL		Date of Receipt
	Mailing Address 1971 MARBLE VALLEY RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	SYLACAUGA	AL	35151
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.81149
Name of Employer PURSELL TECHNOLOGIES		Occupation CHAIRMAN	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 1000.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2050.00
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 105 / 229
(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. Full Name (Last, First, Middle Initial)
ANDREW F PUZDER

Mailing Address 6307 CARPINTERIA AVE SUITE A

City State Zip Code
CARPINTERIA CA 93013

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

Name of Employer Occupation
CKE RESTAURANTS INC CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.83309

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ANN L QUEST

Mailing Address 5609 URSULA

City State Zip Code
DALLAS TX 75229

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

Name of Employer Occupation
INFO REQUESTED, NOT RECD NATIONAL DAY OF PRAYER TEXAS

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.82568

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MRS VICTORIA L RAMSEY

Mailing Address 1943 LUCILLE LN

City State Zip Code
PLEASANT HILL CA 94523

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.83374

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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 106 / 229
(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. Full Name (Last, First, Middle Initial)
MRS KATRINA HOFF RAUSCH

Mailing Address 210 DEMERS LN

City POLSON State MT Zip Code 59860

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

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 30 / 2007
Transaction ID: SA11AI.82114
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
MRS KATRINA HOFF RAUSCH

Mailing Address 210 DEMERS LN

City POLSON State MT Zip Code 59860

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

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt: 12 / 18 / 2007
Transaction ID: SA11AI.82115
Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
MS VERA R REDERBURG

Mailing Address 15312 S NORMADIE AVE APT 220

City GARDENA State CA Zip Code 90247

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

Name of Employer: COMFORCARE SENIOR SERV Occupation: COMPANION

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.50

Date of Receipt: 12 / 19 / 2007
Transaction ID: SA11AI.83046
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► 475.00

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 107 / 229
(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 BETH L REED

Mailing Address 3613 LITTLE RD

City LUTZ State FL Zip Code 33548

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

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 08 / 2007
Transaction ID: SA11AI.81112
 Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
JAMES R REED

Mailing Address 3613 LITTLE ROAD

City LUTZ State FL Zip Code 33548

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

Name of Employer: LIFE CONNECTIONS COUNSELING CENTER Occupation: PSYCHOLOGIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 31 / 2007
Transaction ID: SA11AI.81113
 Amount of Each Receipt this Period: 500.00

C.

Full Name (Last, First, Middle Initial)
MR MICHAEL REED

Mailing Address 1320 SILVER SPRINGS CT SE

City CALEDONIA State MI Zip Code 49316

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 26 / 2007
Transaction ID: SA11AI.81697
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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 108 / 229
	<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 K O REITHMAYR		Date of Receipt
	Mailing Address 45 N LUCAS COURT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 2 7 / 2 0 0 7
	City	State	Zip Code
	NEWBURY PARK	CA	91320
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.83093
Name of Employer INFO REQUESTED, NOT RECD		Occupation INFO REQUESTED- NOT RECD	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

B.	Full Name (Last, First, Middle Initial) MR AVERY RHODEN		Date of Receipt
	Mailing Address 2421 COLLEGE AVE APT 336		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 2 6 / 2 0 0 7
	City	State	Zip Code
	CONWAY	AR	72034
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.82457
Name of Employer RETIRED		Occupation USAF RET	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 205.00

C.	Full Name (Last, First, Middle Initial) MR MICHAEL D RISINGER		Date of Receipt
	Mailing Address 421 E GREENWOOD ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 2 0 / 2 0 0 7
	City	State	Zip Code
	MORTON	IL	61550
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.82215
Name of Employer SELF		Occupation LAWYER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 830.00
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 109 / 229
(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 MICHAEL D RISINGER

Mailing Address 421 E GREENWOOD ST

City State Zip Code
MORTON IL 61550

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

Name of Employer SELF Occupation LAWYER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2007

Transaction ID: SA11AI.82216

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
MR MICHAEL D RISINGER

Mailing Address 421 E GREENWOOD ST

City State Zip Code
MORTON IL 61550

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

Name of Employer SELF Occupation LAWYER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 05 / 2007

Transaction ID: SA11AI.82217

Amount of Each Receipt this Period
600.00

C.

Full Name (Last, First, Middle Initial)
MR MICHAEL D RISINGER

Mailing Address 421 E GREENWOOD ST

City State Zip Code
MORTON IL 61550

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

Name of Employer SELF Occupation LAWYER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 18 / 2007

Transaction ID: SA11AI.82218

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► 1200.00

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 110 / 229
(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. Full Name (Last, First, Middle Initial)
MR JEFFREY ROBILLARD

Mailing Address 5028 LONGVIEW CT

City State Zip Code
WEDDINGTON NC 28104

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

Name of Employer Occupation
SEATTLE SYSTEMS SALES MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	7

Transaction ID: SA11AI.80813

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR JEREMY ROHANE

Mailing Address 7602 SOUTHWOOD DRIVE

City State Zip Code
AMARILLO TX 79119

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	0	7

Transaction ID: SA11AI.82751

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
MS ELIZABETH RONDEAU

Mailing Address 20830 SE EVERGREEN HWY

City State Zip Code
CAMAS WA 98607

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.83714

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **2750.00**

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 111 / 229
(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 LE ROY SANDSTROM

Mailing Address 4096 SE EARLS CT

City State Zip Code
PORT ORCHARD WA 98366

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2007

Transaction ID: SA11AI.83669

Amount of Each Receipt this Period
105.00

B.

Full Name (Last, First, Middle Initial)
MR LE ROY SANDSTROM

Mailing Address 4096 SE EARLS CT

City State Zip Code
PORT ORCHARD WA 98366

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2007

Transaction ID: SA11AI.83670

Amount of Each Receipt this Period
105.00

C.

Full Name (Last, First, Middle Initial)
MS HELEN H SATHER

Mailing Address PO BOX 74

City State Zip Code
ROUND LAKE MN 56167

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2007

Transaction ID: SA11AI.82032

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **460.00**

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 112 / 229
(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 KIMERA J SAUNDERS

Mailing Address 3150 AVENUE E

City BILLINGS State MT Zip Code 59102

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 08 / 14 / 2007
Transaction ID: SA11AI.82081
Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
MR CLAUDE G SCARBROUGH, III

Mailing Address 828 OVERLOOK DR

City COLUMBUS State GA Zip Code 31906

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

Name of Employer SCARBURY PROPERTIES Occupation REAL ESTATE PROFESSIONAL

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 11 / 06 / 2007
Transaction ID: SA11AI.81030
Amount of Each Receipt this Period: 500.00

C.

Full Name (Last, First, Middle Initial)
MRS LARRY SCHICKEDANZ

Mailing Address PO BOX 805

City PERRYTON State TX Zip Code 79070

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

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 31 / 2007
Transaction ID: SA11AI.82747
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ► 1200.00

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 113 / 229
	<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) DAVE SCHMITT		Date of Receipt
	Mailing Address 1460 SENECA RD NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	SWISHER	IA	52338
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.81838
Name of Employer DAVE SCHMITT CONST G INC.		Occupation CONTRACTOR	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 1000.00	<input type="text"/> 500.00

B.	Full Name (Last, First, Middle Initial) MR CHARLES J SCHREIBER, JR		Date of Receipt
	Mailing Address 27091 HIDDEN TRAIL		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	LAGUNA HILLS	CA	92653
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.83227
Name of Employer SELF		Occupation REAL ESTATE INVESTER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 5000.00	<input type="text"/> 5000.00

C.	Full Name (Last, First, Middle Initial) MRS JILL K SCHREIBER		Date of Receipt
	Mailing Address 27091 HIDDEN TRAIL RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	LAGUNA HILLS	CA	92653
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.83228
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 5000.00	<input type="text"/> 5000.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 10500.00
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 114 / 229
(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 JOANNE M SCHROEDER

Mailing Address 15720 52ND AVE N

City State Zip Code
PLYMOUTH MN 55446

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

Name of Employer Occupation
NORTHWESTERN COLLEGE CFO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2007

Transaction ID: SA11AI.81989

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MS LORAS SCHULTE

Mailing Address 305 APACHE DR

City State Zip Code
NORWAY IA 52318

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

Name of Employer Occupation
SELF-EMPLOYED POLITICAL CONSULTANT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2007

Transaction ID: SA11AI.81836

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MS LORAS SCHULTE

Mailing Address 305 APACHE DR

City State Zip Code
NORWAY IA 52318

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

Name of Employer Occupation
SELF-EMPLOYED POLITICAL CONSULTANT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
12 / 14 / 2007

Transaction ID: SA11AI.81837

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **250.00**

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 115 / 229
(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. Full Name (Last, First, Middle Initial)
MRS WILLIAM J SCOTT, DDS
 Mailing Address 1118 S 3RD AVE E
 City State Zip Code
 ELY MN 55731
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 0 / 2 0 0 7
Transaction ID: SA11AI.81994
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFO REQUESTED, NOT RECD INFO REQUESTED- NOT RECD
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

B. Full Name (Last, First, Middle Initial)
MR GARY SELF
 Mailing Address 8508 YORKSHIRE DR
 City State Zip Code
 ORANGE TX 77632
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 0 5 / 2 0 0 7
Transaction ID: SA11AI.82684
 Amount of Each Receipt this Period
 20.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WAL-MART PHARMACIST
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

C. Full Name (Last, First, Middle Initial)
MR GARY SELF
 Mailing Address 8508 YORKSHIRE DR
 City State Zip Code
 ORANGE TX 77632
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 0 5 / 2 0 0 7
Transaction ID: SA11AI.82685
 Amount of Each Receipt this Period
 20.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WAL-MART PHARMACIST
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 230.00

SUBTOTAL of Receipts This Page (optional) ► 1040.00
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 116 / 229
(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. Full Name (Last, First, Middle Initial)
MR GARY SELF

Mailing Address 8508 YORKSHIRE DR

City ORANGE State TX Zip Code 77632

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

Name of Employer WAL-MART Occupation PHARMACIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 05 / 2007
Transaction ID: SA11AI.82686
 Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
MR GARY SELF

Mailing Address 8508 YORKSHIRE DR

City ORANGE State TX Zip Code 77632

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

Name of Employer WAL-MART Occupation PHARMACIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 11 / 05 / 2007
Transaction ID: SA11AI.82687
 Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial)
MR GARY SELF

Mailing Address 8508 YORKSHIRE DR

City ORANGE State TX Zip Code 77632

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

Name of Employer WAL-MART Occupation PHARMACIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 12 / 05 / 2007
Transaction ID: SA11AI.82688
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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 117 / 229
(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. Full Name (Last, First, Middle Initial)
MR L PARKS SHIPLEY

Mailing Address 7214 SOLITUDE RD

City State Zip Code
ST MICHAELS MD 21663

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

Name of Employer Occupation
SELF CONSULTANT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.80650

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
WILLIAM M SHIRLEY

Mailing Address 13121 LOUETTA RD PMB 1055

City State Zip Code
CYPRESS TX 77429

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

Name of Employer Occupation
WM SHIRLEY & ASSOCIATES PRESIDENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 1 8 / 2 0 0 7

Transaction ID: SA11AI.82669

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS LILA A SILVA

Mailing Address 21780 WILCOX RD

City State Zip Code
RED BLUFF CA 96080

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 7

Transaction ID: SA11AI.83474

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

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 118 / 229
(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

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)
WARREN SIMANDLE

Mailing Address 2322 VISTA MADERA

City State Zip Code
SANTA BARBARA CA 93101

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

Name of Employer Occupation
SANTA BARBARA HIGH SCHOOL DIST PUBLIC SCHOOL TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 05 / 2007

Transaction ID: SA11AI.83314

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
WARREN SIMANDLE

Mailing Address 2322 VISTA MADERA

City State Zip Code
SANTA BARBARA CA 93101

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

Name of Employer Occupation
SANTA BARBARA HIGH SCHOOL DIST PUBLIC SCHOOL TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 05 / 2007

Transaction ID: SA11AI.83315

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
WARREN SIMANDLE

Mailing Address 2322 VISTA MADERA

City State Zip Code
SANTA BARBARA CA 93101

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

Name of Employer Occupation
SANTA BARBARA HIGH SCHOOL DIST PUBLIC SCHOOL TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 05 / 2007

Transaction ID: SA11AI.83316

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **75.00**

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 119 / 229
(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. Full Name (Last, First, Middle Initial)
WARREN SIMANDLE

Mailing Address 2322 VISTA MADERA

City State Zip Code
SANTA BARBARA CA 93101

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

Name of Employer Occupation
SANTA BARBARA HIGH SCHOOL DIST PUBLIC SCHOOL TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.83317

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MR GREGORY L SIMONS

Mailing Address 11205 W 140TH PL

City State Zip Code
OVERLAND PARK KS 66221

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

Name of Employer Occupation
INFO REQUESTED, NOT RECD PROF SERVICES

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.82333

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
MR GREGORY L SIMONS

Mailing Address 11205 W 140TH PL

City State Zip Code
OVERLAND PARK KS 66221

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

Name of Employer Occupation
INFO REQUESTED, NOT RECD PROF SERVICES

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.82334

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **525.00**

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 120 / 229
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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 RANDALL SKOV		Date of Receipt
	Mailing Address 115 TALL TIMBER COURT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 07 / 05 / 2007
	City	State	Zip Code
	FAYETTEVILLE	GA	30215
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer US AIR FORCE		Occupation WEATHER OFFICER	Transaction ID: SA11AI.80965
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 350.00	<input type="text"/> 50.00

B.	Full Name (Last, First, Middle Initial) MR RANDALL SKOV		Date of Receipt
	Mailing Address 115 TALL TIMBER COURT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 08 / 05 / 2007
	City	State	Zip Code
	FAYETTEVILLE	GA	30215
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer US AIR FORCE		Occupation WEATHER OFFICER	Transaction ID: SA11AI.80966
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 400.00	<input type="text"/> 50.00

C.	Full Name (Last, First, Middle Initial) MR RANDALL SKOV		Date of Receipt
	Mailing Address 115 TALL TIMBER COURT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 05 / 2007
	City	State	Zip Code
	FAYETTEVILLE	GA	30215
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer US AIR FORCE		Occupation WEATHER OFFICER	Transaction ID: SA11AI.80967
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 450.00	<input type="text"/> 50.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
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 121 / 229
(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. Full Name (Last, First, Middle Initial)
MR RANDALL SKOV

Mailing Address 115 TALL TIMBER COURT

City State Zip Code
FAYETTEVILLE GA 30215

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

Name of Employer Occupation
US AIR FORCE WEATHER OFFICER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.80968

Amount of Each Receipt this Period
50.00

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

Mailing Address 115 TALL TIMBER COURT

City State Zip Code
FAYETTEVILLE GA 30215

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

Name of Employer Occupation
US AIR FORCE WEATHER OFFICER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.80969

Amount of Each Receipt this Period
50.00

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

Mailing Address 115 TALL TIMBER COURT

City State Zip Code
FAYETTEVILLE GA 30215

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

Name of Employer Occupation
US AIR FORCE WEATHER OFFICER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.80970

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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 122 / 229
(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)
STEPHEN P SMITH

Mailing Address 522 ANDERSON ST

City State Zip Code
CASTLE ROCK CO 80104

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

Name of Employer Occupation
US ARMY MILITARY

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.82786

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
DR WILLIAM H SMITH

Mailing Address PO BOX 203

City State Zip Code
KAAAWA HI 96730

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

Name of Employer Occupation
STATE OF HAWAII TEACHER/INTERPRETER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.83483

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
DANNY SNIPES

Mailing Address 7257 MANOR OAKS DR

City State Zip Code
RALEIGH NC 27615

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

Name of Employer Occupation
SNIPES INTERNATIONAL INC MARKETING TRAINER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.80796

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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 123 / 229
	<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)
DANNY SNIPES

Mailing Address 7257 MANOR OAKS DR

City RALEIGH State NC Zip Code 27615

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

Name of Employer SNIPES INTERNATIONAL INC Occupation MARKETING TRAINER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 11 / 06 / 2007
Transaction ID: SA11AI.80797
 Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
MS LONETTE SOLIS

Mailing Address 1909 BUCKTHORN LN

City RESTON State VA Zip Code 20191

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

Name of Employer NORTHROP GRUMMAN Occupation ADMINISTRATIVE ASSISTANT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 08 / 15 / 2007
Transaction ID: SA11AI.80604
 Amount of Each Receipt this Period: 50.00

C.

Full Name (Last, First, Middle Initial)
MS LONETTE SOLIS

Mailing Address 1909 BUCKTHORN LN

City RESTON State VA Zip Code 20191

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

Name of Employer NORTHROP GRUMMAN Occupation ADMINISTRATIVE ASSISTANT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 14 / 2007
Transaction ID: SA11AI.80605
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 600.00

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 124 / 229		
	<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

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A.	Full Name (Last, First, Middle Initial) MS LONETTE SOLIS		Date of Receipt																					
	Mailing Address 1909 BUCKTHORN LN		<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>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		1	5		2	0	0	7														
	City State Zip Code RESTON VA 20191		Transaction ID: SA11AI.80606																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: NORTHROP GRUMMAN Occupation: ADMINISTRATIVE ASSISTANT Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 50.00																						

B.	Full Name (Last, First, Middle Initial) MS LONETTE SOLIS		Date of Receipt																					
	Mailing Address 1909 BUCKTHORN LN		<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>1</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	5		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		1	5		2	0	0	7														
	City State Zip Code RESTON VA 20191		Transaction ID: SA11AI.80607																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: NORTHROP GRUMMAN Occupation: ADMINISTRATIVE ASSISTANT Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00																						

C.	Full Name (Last, First, Middle Initial) MS LONETTE SOLIS		Date of Receipt																					
	Mailing Address 1909 BUCKTHORN LN		<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>1</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	7		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		1	7		2	0	0	7														
	City State Zip Code RESTON VA 20191		Transaction ID: SA11AI.80608																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: NORTHROP GRUMMAN Occupation: ADMINISTRATIVE ASSISTANT Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00																						

SUBTOTAL of Receipts This Page (optional)	▶	150.00
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 125 / 229
(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 MEREDITH SORROW

Mailing Address 256 SMOKERISE TRACE

City State Zip Code
PEACHTREE CITY GA 30269

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2007

Transaction ID: SA11AI.80975

Amount of Each Receipt this Period
400.00

B.

Full Name (Last, First, Middle Initial)
MR RIK SOWELL

Mailing Address 62 RICHLAND HILLS DR

City State Zip Code
CONWAY AR 72034

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

Name of Employer Occupation
SOWELL & RUSSELL ARCHITECTS ARCHITECT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2007

Transaction ID: SA11AI.82458

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MR RIK SOWELL

Mailing Address 62 RICHLAND HILLS DR

City State Zip Code
CONWAY AR 72034

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

Name of Employer Occupation
SOWELL & RUSSELL ARCHITECTS ARCHITECT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
11 / 12 / 2007

Transaction ID: SA11AI.82459

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **550.00**

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 126 / 229
(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.

Full Name (Last, First, Middle Initial)
MR RIK SOWELL

Mailing Address 62 RICHLAND HILLS DR

City State Zip Code
CONWAY AR 72034

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

Name of Employer Occupation
SOWELL & RUSSELL ARCHITECTS ARCHITECT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.82460

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
MR RIK SOWELL

Mailing Address 62 RICHLAND HILLS DR

City State Zip Code
CONWAY AR 72034

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

Name of Employer Occupation
SOWELL & RUSSELL ARCHITECTS ARCHITECT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.82461

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MR C F SPANGLER

Mailing Address 1250 E SOUTHERNVIEW RD

City State Zip Code
OZARK MO 65721

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.82322

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **625.00**

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 127 / 229
(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 THOMAS SPIX

Mailing Address 1177 MILL VALLEY STREET

City ROCHESTER HLS State MI Zip Code 48306

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

Name of Employer GENERAL MOTORS CORPORATION Occupation MECHANICAL ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 11 / 05 / 2007
Transaction ID: SA11AI.81610
Amount of Each Receipt this Period: 20.00

B.

Full Name (Last, First, Middle Initial)
MR THOMAS SPIX

Mailing Address 1177 MILL VALLEY STREET

City ROCHESTER HLS State MI Zip Code 48306

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

Name of Employer GENERAL MOTORS CORPORATION Occupation MECHANICAL ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 12 / 05 / 2007
Transaction ID: SA11AI.81611
Amount of Each Receipt this Period: 20.00

C.

Full Name (Last, First, Middle Initial)
MR JEFFREY L SPONSELLER

Mailing Address 7320 LOMA VISTA RD

City VENTURA State CA Zip Code 93003

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

Name of Employer M & M MANAGEMENT CO INC Occupation COO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 12 / 10 / 2007
Transaction ID: SA11AI.83301
Amount of Each Receipt this Period: 2000.00

SUBTOTAL of Receipts This Page (optional) ► 2040.00

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 128 / 229
(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 & MRS PATRICK A SPRUNGER

Mailing Address 5915 HEYWOOD CV

City State Zip Code
FORT WAYNE IN 46815

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

Name of Employer Occupation
SIMPLEX GEN MGR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: SA11AI.81543

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
MR & MRS PATRICK A SPRUNGER

Mailing Address 5915 HEYWOOD CV

City State Zip Code
FORT WAYNE IN 46815

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

Name of Employer Occupation
SIMPLEX GEN MGR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.81544

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
MRS JAMES STADLER

Mailing Address 314 WALNUT DR

City State Zip Code
NASHVILLE TN 37205

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

Name of Employer Occupation
RETIRED HOUSEWIFE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.81228

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **2350.00**

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 129 / 229
(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 MARIE STAMPS

Mailing Address 955 HARPERSVILLE RD APT 2052

City State Zip Code
NEWPORT NEWS VA 23601

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.80735

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
MRS MARIE STAMPS

Mailing Address 955 HARPERSVILLE RD APT 2052

City State Zip Code
NEWPORT NEWS VA 23601

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.80736

Amount of Each Receipt this Period
225.00

C.

Full Name (Last, First, Middle Initial)
KARI STANGENES

Mailing Address 124 JARDIN DR

City State Zip Code
LOS ALTOS CA 94022

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

Name of Employer Occupation
STANGENES INDUSTRIES INC BOOKKEEPER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.83361

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1025.00**

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 130 / 229
(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. Full Name (Last, First, Middle Initial)
MR GRAHAM START

Mailing Address 1755 KILKARE RD

City State Zip Code
SUNOL CA 94586

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

Name of Employer SELF EMPLOYED Occupation SALES

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	7	/	2	0	0	7

Transaction ID: SA11AI.83382

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR GRAHAM START

Mailing Address 1755 KILKARE RD

City State Zip Code
SUNOL CA 94586

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

Name of Employer SELF EMPLOYED Occupation SALES

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	7

Transaction ID: SA11AI.83383

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR GRAHAM START

Mailing Address 1755 KILKARE RD

City State Zip Code
SUNOL CA 94586

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

Name of Employer SELF EMPLOYED Occupation SALES

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.83384

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **500.00**

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 131 / 229
(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 THOMAS H STEBBINS

Mailing Address 225 BARDEN DR

City State Zip Code
DELAND FL 32720

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.81069

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
MR THOMAS H STEBBINS

Mailing Address 225 BARDEN DR

City State Zip Code
DELAND FL 32720

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	0	7

Transaction ID: SA11AI.81070

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
MR RICHARD STEFANOWSKI

Mailing Address 105 KESTREL WAY

City State Zip Code
HARTLAND WI 53029

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

Name of Employer Occupation
PRO-TEC EQUIPMENT CO SALES

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	0	7

Transaction ID: SA11AI.81853

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

600.00

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: (check only one)	PAGE 132 / 229
	<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) MS KIMBERLEY STEWART	Date of Receipt MM / DD / YYYY 11 / 02 / 2007
	Mailing Address 1001 26TH ST NW APT 301	Transaction ID: SA11AI.80595
	City State Zip Code WASHINGTON DC 20037	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation INFO REQUESTED, NOT RECD INFO REQUESTED- NOT RECD	
Receipt For: 2008 <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) MRS BARBARA STILSON	Date of Receipt MM / DD / YYYY 12 / 18 / 2007
	Mailing Address 26501 BROKEN BIT LN	Transaction ID: SA11AI.83229
	City State Zip Code LAGUNA HILLS CA 92653	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation SELF HOMEMAKER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) MR RICHARD MOORE STIMPSON	Date of Receipt MM / DD / YYYY 10 / 22 / 2007
	Mailing Address 56 OAKLAND AVE	Transaction ID: SA11AI.81212
	City State Zip Code MOBILE AL 36608	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation INFO REQUESTED, NOT RECD INFO REQUESTED- NOT RECD	
Receipt For: 2008 <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)	550.00
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 133 / 229
(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. Full Name (Last, First, Middle Initial)
MR W S STIMPSON

Mailing Address PO BOX 1663

City State Zip Code
MOBILE AL 36633

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

Name of Employer Occupation
GULF LUMBER CO CFO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.81214

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR JOANNE STOLLER

Mailing Address 919 N COLISEUM BLVD

City State Zip Code
FORT WAYNE IN 46805

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

Name of Employer Occupation
FT WAYNE, IN EXECUTIVE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: SA11AI.81539

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS CAREEN H STRANGE

Mailing Address 4805 HIGHWAY 19 SOUTH

City State Zip Code
ELLAVILLE GA 31806

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.81025

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **1400.00**

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 134 / 229
(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. Full Name (Last, First, Middle Initial)
MR STEPHEN STUDE
Mailing Address 32797 820TH STREET
City BREWSTER State MN Zip Code 56119
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation FARMER
Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 09 / 05 / 2007
Transaction ID: SA11AI.82022
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
MR STEPHEN STUDE
Mailing Address 32797 820TH STREET
City BREWSTER State MN Zip Code 56119
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation FARMER
Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 10 / 05 / 2007
Transaction ID: SA11AI.82023
Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
MR STEPHEN STUDE
Mailing Address 32797 820TH STREET
City BREWSTER State MN Zip Code 56119
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation FARMER
Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00
Date of Receipt 11 / 05 / 2007
Transaction ID: SA11AI.82024
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 75.00
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 135 / 229
(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 STEPHEN STUDE

Mailing Address 32797 820TH STREET

City State Zip Code
BREWSTER MN 56119

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.82025

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
MR GEORGE 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 RETIRED Occupation RET

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.82539

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
MR GEORGE 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 RETIRED Occupation RET

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.82540

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **625.00**

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 136 / 229
(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. Full Name (Last, First, Middle Initial)
MR GEORGE EDWARD SUITER

Mailing Address 2025 LAMBERT CT

City PLANO State TX Zip Code 75075

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

Name of Employer RETIRED Occupation RET

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 04 / 2007
Transaction ID: SA11AI.82541
 Amount of Each Receipt this Period 400.00

B. Full Name (Last, First, Middle Initial)
MR GEORGE EDWARD SUITER

Mailing Address 2025 LAMBERT CT

City PLANO State TX Zip Code 75075

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

Name of Employer RETIRED Occupation RET

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 11 / 12 / 2007
Transaction ID: SA11AI.82542
 Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
MR GEORGE EDWARD SUITER

Mailing Address 2025 LAMBERT CT

City PLANO State TX Zip Code 75075

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

Name of Employer RETIRED Occupation RET

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 12 / 17 / 2007
Transaction ID: SA11AI.82543
 Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1900.00

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 137 / 229
(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 MARK SWISHER		Date of Receipt MM / DD / YYYY 07 / 05 / 2007
Mailing Address 24902 N POINTE PLACE		Transaction ID: SA11AI.82675
City KATY	State TX	Zip Code 77494
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer AVIARA ENERGY CORPORATION	Occupation ENGINEER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.

Full Name (Last, First, Middle Initial) MR MARK SWISHER		Date of Receipt MM / DD / YYYY 08 / 05 / 2007
Mailing Address 24902 N POINTE PLACE		Transaction ID: SA11AI.82676
City KATY	State TX	Zip Code 77494
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer AVIARA ENERGY CORPORATION	Occupation ENGINEER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.

Full Name (Last, First, Middle Initial) MR MARK SWISHER		Date of Receipt MM / DD / YYYY 09 / 05 / 2007
Mailing Address 24902 N POINTE PLACE		Transaction ID: SA11AI.82677
City KATY	State TX	Zip Code 77494
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer AVIARA ENERGY CORPORATION	Occupation ENGINEER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional)	▶	150.00
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 138 / 229
(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 MARK SWISHER

Mailing Address 24902 N POINTE PLACE

City State Zip Code
KATY TX 77494

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

Name of Employer Occupation
AVIARA ENERGY CORPORATION ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	5		2	0	0	7

Transaction ID: SA11AI.82678

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
MR MARK SWISHER

Mailing Address 24902 N POINTE PLACE

City State Zip Code
KATY TX 77494

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

Name of Employer Occupation
AVIARA ENERGY CORPORATION ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	0	7

Transaction ID: SA11AI.82679

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
MR MARK SWISHER

Mailing Address 24902 N POINTE PLACE

City State Zip Code
KATY TX 77494

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

Name of Employer Occupation
AVIARA ENERGY CORPORATION ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	7

Transaction ID: SA11AI.82680

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 139 / 229
(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. Full Name (Last, First, Middle Initial)
DR JAMES P SYVRUD

Mailing Address 8225 BRUTON RD

City State Zip Code
DALLAS TX 78217

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

Name of Employer OWNER Occupation CHIROPRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2007

Transaction ID: SA11AI.83759

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
DR JAMES P SYVRUD

Mailing Address 8225 BRUTON RD

City State Zip Code
DALLAS TX 78217

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

Name of Employer OWNER Occupation CHIROPRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2007

Transaction ID: SA11AI.83760

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DR JAMES P SYVRUD

Mailing Address 8225 BRUTON RD

City State Zip Code
DALLAS TX 78217

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

Name of Employer OWNER Occupation CHIROPRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
MM / DD / YYYY
09 / 11 / 2007

Transaction ID: SA11AI.83761

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 140 / 229
(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)
DR JAMES P SYVRUD

Mailing Address 8225 BRUTON RD

City State Zip Code
DALLAS TX 78217

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

Name of Employer OWNER Occupation CHIROPRACTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.83762

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
DR JAMES P SYVRUD

Mailing Address 8225 BRUTON RD

City State Zip Code
DALLAS TX 78217

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

Name of Employer OWNER Occupation CHIROPRACTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.83763

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
DR JAMES P SYVRUD

Mailing Address 8225 BRUTON RD

City State Zip Code
DALLAS TX 78217

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

Name of Employer OWNER Occupation CHIROPRACTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.83764

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 141 / 229
(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. Full Name (Last, First, Middle Initial)
MS JANNA TARBOX

Mailing Address 3501 W OLD FIELD RD

City State Zip Code
COLUMBIA MO 65203

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2007

Transaction ID: SA11AI.82313

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DENNIS R TAYLOR

Mailing Address 2604 MOUNT CARMEL RD

City State Zip Code
HAMPTON GA 30228

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

Name of Employer Occupation
PLUM CREEK PROPERTY TAX MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 18 / 2007

Transaction ID: SA11AI.80971

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR WILLIAM D TEISMAN

Mailing Address 3423 FIELDSTONE CT

City State Zip Code
HUDSONVILLE MI 49426

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

Name of Employer Occupation
REQUEST FOODS HUMAN RESOURCES

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 11 / 2007

Transaction ID: SA11AI.81714

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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 142 / 229
(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 LINDA TENNY

Mailing Address 100 ROCKINGTON DR

City State Zip Code
TYRONE GA 30290

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

Name of Employer Occupation
SELF HOMEMAKER & PART TIME SALES

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: SA11AI.80980

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
MRS CAROL D TEODORO

Mailing Address 3008 E BAY DR NW

City State Zip Code
GIG HARBOR WA 98335

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

Name of Employer Occupation
AUTOMATED SYSTEMS OF TACO-MA DON-ENGINEER CAROL-HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	7

Transaction ID: SA11AI.83665

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
MRS ELOISE W TERRY

Mailing Address 2825 BLOOMFIELD RD 14

City State Zip Code
CPE GIRARDEAU MO 63703

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6		2	0	0	7

Transaction ID: SA11AI.82285

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1050.00

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 143 / 229
(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. Full Name (Last, First, Middle Initial)
MRS ELOISE W TERRY

Mailing Address 2825 BLOOMFIELD RD 14

City State Zip Code
CPE GIRARDEAU MO 63703

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	1	/	2	0	0	7

Transaction ID: SA11AI.82286

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MS MARGO THELEN

Mailing Address 545 LANE RD

City State Zip Code
WOODLAND WA 98674

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

Name of Employer Occupation
SW WASHINGTON MEDICAL CENTER PHARMACIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	4	/	2	0	0	7

Transaction ID: SA11AI.83723

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MS MARGO THELEN

Mailing Address 545 LANE RD

City State Zip Code
WOODLAND WA 98674

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

Name of Employer Occupation
SW WASHINGTON MEDICAL CENTER PHARMACIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	6	/	2	0	0	7

Transaction ID: SA11AI.83724

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **900.00**

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 144 / 229

(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 HARRIET THEUNE

Mailing Address PO BOX 700306

City State Zip Code
OOSTBURG WI 53070

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.81856

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)
WENDY TIMMERMAN

Mailing Address 1395 HILLRIDGE WAY

City State Zip Code
ZEELAND MI 49464

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

Name of Employer Occupation
FILLMORE EQUIPMENT OWNER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.81721

Amount of Each Receipt this Period

1000.00

C.

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

Mailing Address 1444 BETHEL CHURCH RD

City State Zip Code
ELKTON VA 22827

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

Name of Employer Occupation
ROCKINGHAM MEMORIAL HOSPITAL PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.80717

Amount of Each Receipt this Period

330.00

SUBTOTAL of Receipts This Page (optional)

1405.00

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 145 / 229
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A.

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

Mailing Address 1444 BETHEL CHURCH RD

City State Zip Code
ELKTON VA 22827

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

Name of Employer Occupation
ROCKINGHAM MEMORIAL HOSPITAL PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
830.00

Date of Receipt
MM / DD / YYYY
10 / 08 / 2007

Transaction ID: SA11AI.80718

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
JACK TOMPKINS

Mailing Address 304 LONGWOODS LN

City State Zip Code
HOUSTON TX 77024

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2007

Transaction ID: SA11AI.82636

Amount of Each Receipt this Period
2000.00

C.

Full Name (Last, First, Middle Initial)
MR PAUL A TONDRE

Mailing Address 410 RUA DE MATTA

City State Zip Code
SAN ANTONIO TX 78232

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2007

Transaction ID: SA11AI.82714

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **2575.00**

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 146 / 229
	<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) MS CAROLE TOWNSEND	Date of Receipt MM / DD / YYYY 09 / 26 / 2007
	Mailing Address 30 LONE PINE WAY	Transaction ID: SA11AI.82880
	City State Zip Code COLORADO SPRINGS CO 80919	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CHAPEL HILLS ORTHODONTIC CENTER LLC BOOKEEPER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) CLIFFORD F TRACY	Date of Receipt MM / DD / YYYY 10 / 08 / 2007
	Mailing Address 18747 SAN FELIPE ST	Transaction ID: SA11AI.83265
	City State Zip Code FOUNTAIN VALLEY CA 92708	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) MR GEORGE E TRAGOS	Date of Receipt MM / DD / YYYY 12 / 28 / 2007
	Mailing Address 818 ISLAND WAY	Transaction ID: SA11AI.81120
	City State Zip Code CLEARWATER FL 33767	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation SELF ATTORNEY	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	▶	2900.00
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 147 / 229
(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. Full Name (Last, First, Middle Initial)
MR RICHARD V TREAKLE
Mailing Address 510 PINE LN
City LOS ALTOS State CA Zip Code 94022
FEC ID number of contributing federal political committee. **C**
Name of Employer INFO REQUESTED, NOT RECD Occupation INFO REQUESTED- NOT RECD
Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 07 / 09 / 2007
Transaction ID: SA11AI.83362
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
MR RICHARD V TREAKLE
Mailing Address 510 PINE LN
City LOS ALTOS State CA Zip Code 94022
FEC ID number of contributing federal political committee. **C**
Name of Employer INFO REQUESTED, NOT RECD Occupation INFO REQUESTED- NOT RECD
Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00
Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.83363
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
MR PHIL TROESTER
Mailing Address 908 S U RD
City HAMPTON State NE Zip Code 68843
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation FARMER
Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 10 / 22 / 2007
Transaction ID: SA11AI.82393
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 1450.00
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 148 / 229
(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. Full Name (Last, First, Middle Initial)
MR JOHN TRUELSON

Mailing Address 3108 CARUTH BLVD

City State Zip Code
DALLAS TX 75225

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

Name of Employer SELF EMPLOYED Occupation SELF EMPLOYED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2814.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	3	/	2	0	0	7

Transaction ID: SA11AI.82566

Amount of Each Receipt this Period
2814.30

B. Full Name (Last, First, Middle Initial)
MR & MRS LAUREL TVEIT

Mailing Address 610 HAZEN BAY RD

City State Zip Code
HAZEN ND 58545

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

Name of Employer SELF-EMPLOYED BERGSTEDT IMP IN Occupation FARM EQUIP RETAILER - & HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	6	/	2	0	0	7

Transaction ID: SA11AI.82072

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
DENNIS L ULRICH

Mailing Address 1108 ESCONDIDO

City State Zip Code
TURLOCK CA 95380

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

Name of Employer ULRICH MORTGAGE CO INC Occupation MORTGAGE BROKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	6	/	2	0	0	7

Transaction ID: SA11AI.83425

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **3614.30**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 229
(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. Full Name (Last, First, Middle Initial)
MRS POLLY URQUHART

Mailing Address 5964 MELETIO LN

City State Zip Code
DALLAS TX 75230

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	1	/	2	0	0	7

Transaction ID: SA11AI.82570

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR JOSEPH F VACCARO

Mailing Address 21951 WAKEFIELD CT

City State Zip Code
SAUGUS CA 91350

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.83097

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR GERALD R VANDERLUGT

Mailing Address 1535 44TH ST SW STE 400

City State Zip Code
WYOMING MI 49509

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

Name of Employer Occupation
JVL ASSOCIATES LLC FINANCIAL ADVISOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	1	/	2	0	0	7

Transaction ID: SA11AI.81734

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: PAGE 150 / 229
(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 GORDON M VANSINGEL

Mailing Address 2741 BAUER RD

City State Zip Code
JENISON MI 49428

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

Name of Employer Occupation
VANSINGEL ELECTINC HOME MAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.81718

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
MR LARRY VERSAW

Mailing Address 13868 W 3RD PL

City State Zip Code
GOLDEN CO 80401

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

Name of Employer Occupation
LEARNING INT'L SYSTEMS ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.82827

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
MR LARRY VERSAW

Mailing Address 13868 W 3RD PL

City State Zip Code
GOLDEN CO 80401

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

Name of Employer Occupation
LEARNING INT'L SYSTEMS ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.82828

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **550.00**

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 151 / 229
(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. Full Name (Last, First, Middle Initial)
MR MARK A WALKOTTEN

Mailing Address 3755 ACRON RIDGE CT NE

City GRAND RAPIDS State MI Zip Code 49525

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

Name of Employer CROWE CHIZEK & CO Occupation CPA

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 03 / 2007
Transaction ID: SA11AI.81738
 Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
MR DAVID E WARD, JR

Mailing Address PO BOX 329

City WIMAUMA State FL Zip Code 33598

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

Name of Employer CARDWALL FARMS Occupation BUSINESSMAN/ATTORNEY

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 07 / 24 / 2007
Transaction ID: SA11AI.81115
 Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
MR DAVID E WARD, JR

Mailing Address PO BOX 329

City WIMAUMA State FL Zip Code 33598

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

Name of Employer CARDWALL FARMS Occupation BUSINESSMAN/ATTORNEY

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 12 / 27 / 2007
Transaction ID: SA11AI.81116
 Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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 152 / 229
(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. Full Name (Last, First, Middle Initial)
MS GLENDA WEATHERLY

Mailing Address PO BOX 1245

City State Zip Code
WHEELER TX 79096

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	0	7

Transaction ID: SA11AI.82749

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR ROBERT G WEEKS

Mailing Address 3551 W 192ND ST

City State Zip Code
HOMEWOOD IL 60430

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

Name of Employer Occupation
RG WEEKS CONSTRUCTION CARPENTER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.82159

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MRS CHRISTY R WEST

Mailing Address 385 HARRODSWOOD RD

City State Zip Code
FRANKFORT KY 40601

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

Name of Employer Occupation
WESTCO CONSULTING INC BUSINESS OWNER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	8	/	2	0	0	7

Transaction ID: SA11AI.81318

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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 153 / 229
(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)
DAVID B WESTRATE

Mailing Address 6101 N SHORE DR

City State Zip Code
EAU CLAIRE WI 54703

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	7		2	0	0	7

Transaction ID: SA11AI.81920

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
MS KAY M WEYMOUTH

Mailing Address 2161 LIANE LN

City State Zip Code
SANTA ANA CA 92705

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

Name of Employer Occupation
REP PARTY OF ORANGE COUNTY HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	7		2	0	0	7

Transaction ID: SA11AI.83263

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
MRS CHRISTINE A WHITCOMB

Mailing Address 9609 PARKEDGE DR

City State Zip Code
ALLISON PARK PA 15101

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	0	7

Transaction ID: SA11AI.80474

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

950.00

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 154 / 229
(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 DONALD A WHITE, JR

Mailing Address 9412 ROCKY HILLS DR

City State Zip Code
CORDOVA TN 38018

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	7

Transaction ID: SA11AI.81270

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
MR DONALD A WHITE, JR

Mailing Address 9412 ROCKY HILLS DR

City State Zip Code
CORDOVA TN 38018

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	1		2	0	0	7

Transaction ID: SA11AI.81271

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
JIM WHITE

Mailing Address PO BOX 1102

City State Zip Code
OZONA TX 76943

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

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	0	7

Transaction ID: SA11AI.82628

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 155 / 229
(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.

Full Name (Last, First, Middle Initial)
JIM WHITE

Mailing Address PO BOX 1102

City OZONA State TX Zip Code 76943

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

Name of Employer UNEMPLOYED Occupation UNEMPLOYED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 17 / 2007

Transaction ID: SA11AI.82629

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
MR KEITH M WHITE

Mailing Address 15 OAK PL

City NE IBERIA State LA Zip Code 70563

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 10 / 2007

Transaction ID: SA11AI.82423

Amount of Each Receipt this Period 2500.00

C.

Full Name (Last, First, Middle Initial)
MRS WARD A WHITEMAN

Mailing Address 4007 NORWOOD ST

City MIDLAND State TX Zip Code 79707

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

Name of Employer BURLINGTON RESOURCES Occupation GEOLOGIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 28 / 2007

Transaction ID: SA11AI.82774

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 3100.00

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 156 / 229
(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 WARD A WHITEMAN

Mailing Address 4007 NORWOOD ST

City MIDLAND State TX Zip Code 79707

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

Name of Employer BURLINGTON RESOURCES Occupation GEOLOGIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2007

Transaction ID: SA11AI.82775

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
MRS LOIS WIERENGA

Mailing Address 3442 OLDERIDGE DR NE

City GRAND RAPIDS State MI Zip Code 49525

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

Name of Employer GRAND RAPIDS PUBLIC SCHOOLS Occupation TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 05 / 2007

Transaction ID: SA11AI.81741

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
MRS LOIS WIERENGA

Mailing Address 3442 OLDERIDGE DR NE

City GRAND RAPIDS State MI Zip Code 49525

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

Name of Employer GRAND RAPIDS PUBLIC SCHOOLS Occupation TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 05 / 2007

Transaction ID: SA11AI.81742

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **550.00**

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 157 / 229						
	(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

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A.	Full Name (Last, First, Middle Initial) MRS LOIS WIERENGA		Date of Receipt MM / DD / YYYY 11 / 05 / 2007	
	Mailing Address 3442 OLDERIDGE DR NE		Transaction ID: SA11AI.81743	
	City	State	Zip Code	Amount of Each Receipt this Period
	GRAND RAPIDS	MI	49525	25.00
	FEC ID number of contributing federal political committee. C			
Name of Employer GRAND RAPIDS PUBLIC SCHOOLS		Occupation TEACHER		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00		

B.	Full Name (Last, First, Middle Initial) MRS LOIS WIERENGA		Date of Receipt MM / DD / YYYY 12 / 05 / 2007	
	Mailing Address 3442 OLDERIDGE DR NE		Transaction ID: SA11AI.81744	
	City	State	Zip Code	Amount of Each Receipt this Period
	GRAND RAPIDS	MI	49525	25.00
	FEC ID number of contributing federal political committee. C			
Name of Employer GRAND RAPIDS PUBLIC SCHOOLS		Occupation TEACHER		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

C.	Full Name (Last, First, Middle Initial) MR A WAYNE WITT		Date of Receipt MM / DD / YYYY 12 / 28 / 2007	
	Mailing Address 4001 BUCKINGHAM WAY		Transaction ID: SA11AI.80785	
	City	State	Zip Code	Amount of Each Receipt this Period
	APEX	NC	27502	506.42
	FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED, NOT RECD		Occupation BUILDER		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 506.42		

SUBTOTAL of Receipts This Page (optional)	556.42
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 158 / 229
	<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 IRENE MA WONG		Date of Receipt
	Mailing Address 711 NOME AVE		<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 1 0 / 3 0 / 2 0 0 7
	City	State	Zip Code
	MODESTO	CA	95350
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.83418
Name of Employer SUTTER GOULD MED FOUNDATI- ON		Occupation CLINICAL LAB SCIENTIST	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	250.00

B.	Full Name (Last, First, Middle Initial) MR E M WOODY-CLARK		Date of Receipt
	Mailing Address 1234 NE HORN AVE		<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 0 8 / 2 3 / 2 0 0 7
	City	State	Zip Code
	PENDLETON	OR	97801
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.83594
Name of Employer WOODPECKER TRUCK		Occupation TRUCK SALES	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	300.00

C.	Full Name (Last, First, Middle Initial) MS DOROTHY V WRAY		Date of Receipt
	Mailing Address 1416 GRAND AVE		<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 1 2 / 1 9 / 2 0 0 7
	City	State	Zip Code
	SWEETWATER	TX	79556
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.82769
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	70.00

SUBTOTAL of Receipts This Page (optional)	620.00
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 159 / 229
	(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

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) MRS JEANETTE F YANDOW		Date of Receipt
Mailing Address 1133 LONG POND 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 ROCHESTER NY 14626		<input type="text"/> 08 / <input type="text"/> 23 / <input type="text"/> 2007
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80455
Name of Employer INFO REQUESTED, NOT RECD		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text"/> 500.00
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 500.00	

B.

Full Name (Last, First, Middle Initial) MRS JEANETTE F YANDOW		Date of Receipt
Mailing Address 1133 LONG POND 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 ROCHESTER NY 14626		<input type="text"/> 11 / <input type="text"/> 02 / <input type="text"/> 2007
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80456
Name of Employer INFO REQUESTED, NOT RECD		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text"/> 250.00
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 750.00	

C.

Full Name (Last, First, Middle Initial) MRS JEANETTE F YANDOW		Date of Receipt
Mailing Address 1133 LONG POND 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 ROCHESTER NY 14626		<input type="text"/> 11 / <input type="text"/> 16 / <input type="text"/> 2007
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80457
Name of Employer INFO REQUESTED, NOT RECD		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text"/> 500.00
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 1250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1250.00
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 160 / 229

(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 JEANETTE F YANDOW

Mailing Address 1133 LONG POND RD

City State Zip Code
ROCHESTER NY 14626

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

Name of Employer Occupation
INFO REQUESTED, NOT RECD RETIRED

Receipt For: 2008 Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.80458

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
MRS JOHN C YELVERTON

Mailing Address 26 MYRTLE ISLAND CIR

City State Zip Code
BLUFFTON SC 29910

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

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2008 Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.80908

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
MRS JOHN C YELVERTON

Mailing Address 26 MYRTLE ISLAND CIR

City State Zip Code
BLUFFTON SC 29910

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

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2008 Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.80909

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1250.00

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 161 / 229
(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
							17

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A.

Full Name (Last, First, Middle Initial)
MR MIKE YORKEY

Mailing Address 522 HILLOCK PL

City State Zip Code
ENCINITAS CA 92024

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

Name of Employer Occupation
SELF-EMPLOYED AUTHOR

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	7		2	0	0	7

Transaction ID: SA11AI.83125

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
MRS CYNTHIA ZAPOTOCKY

Mailing Address PO BOX 8672

City State Zip Code
SPOKANE WA 99203

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

Name of Employer Occupation
SELF HOUSEWIFE

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	8		2	0	0	7

Transaction ID: SA11AI.83736

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
JUNE L ZEIGLER

Mailing Address 2261 WARREN DR

City State Zip Code
MORRISTOWN TN 37814

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	4		2	0	0	7

Transaction ID: SA11AI.81253

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ▶

405.00

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 162 / 229
(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. Full Name (Last, First, Middle Initial)
MR BRUCE C ZEISER

Mailing Address 1410 TAFT HWY

City State Zip Code
SIGNAL MOUNTAIN TN 37377

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.81236

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
JOANNE P ZEISER

Mailing Address 510 ROLLING WAY

City State Zip Code
SIGNAL MOUNTAIN TN 37377

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	1	/	2	0	0	7

Transaction ID: SA11AI.81238

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
MR JOHN ZEISER

Mailing Address 17 ROCK CREST DRIVE

City State Zip Code
SIGNAL MOUNTAIN TN 37377

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

Name of Employer Occupation
SOUTHERN CHAMPION TRAY LP PRESIDENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	0	7

Transaction ID: SA11AI.81237

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **13000.00**

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 163 / 229
(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. Full Name (Last, First, Middle Initial)
MR DAVID ZIMMERMAN

Mailing Address 3177 KINROSS CIR

City State Zip Code
OAK HILL VA 20171

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.80598

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. JAMES ZINSMASER

Mailing Address 9087 WHITE PELICAN WAY

City State Zip Code
LITTLETON CO 80126

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.82791

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MRS ELSIE ZUERCHER

Mailing Address 1556 SW SANTA FE LAKE RD R

City State Zip Code
TOWANDA KS 67144

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

Name of Employer Occupation
HOUSEWORK PREVITE HOMES HOUSEKEEPER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.82350

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **1275.00**

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 164 / 229
(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. Full Name (Last, First, Middle Initial)
MRS ELSIE ZUERCHER

Mailing Address 1556 SW SANTA FE LAKE RD R

City State Zip Code
TOWANDA KS 67144

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

Name of Employer Occupation
HOUSEWORK PREVITE HOMES HOUSEKEEPER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.82351

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MRS ELSIE ZUERCHER

Mailing Address 1556 SW SANTA FE LAKE RD R

City State Zip Code
TOWANDA KS 67144

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

Name of Employer Occupation
HOUSEWORK PREVITE HOMES HOUSEKEEPER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.82352

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MRS ELSIE ZUERCHER

Mailing Address 1556 SW SANTA FE LAKE RD R

City State Zip Code
TOWANDA KS 67144

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

Name of Employer Occupation
HOUSEWORK PREVITE HOMES HOUSEKEEPER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.82353

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **75.00**

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 165 / 229
(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 ELSIE ZUERCHER

Mailing Address 1556 SW SANTA FE LAKE RD R

City State Zip Code
TOWANDA KS 67144

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

Name of Employer Occupation
HOUSEWORK PREVITE HOMES HOUSEKEEPER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.82354

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)	▶	25.00
TOTAL This Period (last page this line number only)	▶	220875.72

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 166 / 229
(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"/> 14	<input checked="" 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)
US POSTMASTER

Mailing Address Main Post Office

City State Zip Code
Washington DC 20000

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
283.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	0	7

Transaction ID: SA15.80245

Amount of Each Receipt this Period
283.05

PAC - BRE Postage Refund

SUBTOTAL of Receipts This Page (optional)	▶	283.05
TOTAL This Period (last page this line number only)	▶	283.05

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 167 / 229
(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"/> 14	<input type="checkbox"/> 15	<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 Mailing Address P.O. Box 580363		Date of Receipt MM / DD / YYYY 07 / 31 / 2007
City State Zip Code Charlotte NC 28258		Transaction ID: SA17.80246
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2173.82
Name of Employer	Occupation	Interest Income
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15036.17	

B.

Full Name (Last, First, Middle Initial) BB&T Mailing Address P.O. Box 580363		Date of Receipt MM / DD / YYYY 08 / 31 / 2007
City State Zip Code Charlotte NC 28258		Transaction ID: SA17.80247
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2120.29
Name of Employer	Occupation	Interest Income
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 17156.46	

C.

Full Name (Last, First, Middle Initial) BB&T Mailing Address P.O. Box 580363		Date of Receipt MM / DD / YYYY 09 / 30 / 2007
City State Zip Code Charlotte NC 28258		Transaction ID: SA17.80248
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1881.10
Name of Employer	Occupation	Interest Income
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 19037.56	

SUBTOTAL of Receipts This Page (optional)	▶	6175.21
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 168 / 229
(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. Full Name (Last, First, Middle Initial)
BB&T
Mailing Address P.O. Box 580363

City State Zip Code
Charlotte NC 28258

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
21722.26

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	7

Transaction ID: SA17.80249
 Amount of Each Receipt this Period
2684.70
 Interest Income

B. Full Name (Last, First, Middle Initial)
BB&T
Mailing Address P.O. Box 580363

City State Zip Code
Charlotte NC 28258

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
24186.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	7

Transaction ID: SA17.80250
 Amount of Each Receipt this Period
2464.61
 Interest Income

C. Full Name (Last, First, Middle Initial)
BB&T
Mailing Address P.O. Box 580363

City State Zip Code
Charlotte NC 28258

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
26548.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA17.80251
 Amount of Each Receipt this Period
2361.74
 Interest Income

SUBTOTAL of Receipts This Page (optional) ► **7511.05**

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 169 / 229	
	(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) PINNACLE LIST CO.		Date of Receipt
Mailing Address 2800 Shirlington Road 9th Floor		<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2007"/>
City	State	Zip Code
Arlington	VA	22206
FEC ID number of contributing federal political committee.		Transaction ID: SA17.80244
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="25915.47"/>
Occupation		PAC - List Rental Income
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="25915.47"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="25915.47"/>
TOTAL This Period (last page this line number only)	<input type="text" value="39601.73"/>

**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 170 / 229

<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.74746
	Mailing Address 1800 ROBERT FULTON DRIVE	Date of Disbursement 08 / 01 / 2007
	City RESTON State VA Zip Code 20191	Amount of Each Disbursement this Period 624.22
	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) ACCESS BANK	Transaction ID: SB21B.74806
	Mailing Address 1800 ROBERT FULTON DRIVE	Date of Disbursement 08 / 03 / 2007
	City RESTON State VA Zip Code 20191	Amount of Each Disbursement this Period 38.70
	Purpose of Disbursement Bank Fees - Deposit Tickets	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) ACCESS BANK	Transaction ID: SB21B.74750
	Mailing Address 1800 ROBERT FULTON DRIVE	Date of Disbursement 09 / 05 / 2007
	City RESTON State VA Zip Code 20191	Amount of Each Disbursement this Period 260.90
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	923.82
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) ACCESS BANK <hr/> Mailing Address 1800 ROBERT FULTON DRIVE <hr/> City RESTON State VA Zip Code 20191 <hr/> Purpose of Disbursement Bank Fees Candidate Name Category/Type <hr/> 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) ▼	Transaction ID: SB21B.74754 Date of Disbursement 09 / 18 / 2007 <hr/> Amount of Each Disbursement this Period 4.50
B.	Full Name (Last, First, Middle Initial) ACCESS BANK <hr/> Mailing Address 1800 ROBERT FULTON DRIVE <hr/> City RESTON State VA Zip Code 20191 <hr/> Purpose of Disbursement Credit Card Processing Candidate Name Category/Type <hr/> 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) ▼	Transaction ID: SB21B.74758 Date of Disbursement 10 / 02 / 2007 <hr/> Amount of Each Disbursement this Period 393.62
C.	Full Name (Last, First, Middle Initial) ACCESS BANK <hr/> Mailing Address 1800 ROBERT FULTON DRIVE <hr/> City RESTON State VA Zip Code 20191 <hr/> Purpose of Disbursement CREDIT CARD PROCESSING Candidate Name Category/Type <hr/> 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) ▼	Transaction ID: SB21B.74774 Date of Disbursement 11 / 02 / 2007 <hr/> Amount of Each Disbursement this Period 283.48

SUBTOTAL of Disbursements This Page (optional) ▶	681.60
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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) Daniel Allott	Transaction ID: SB21B.80000 Date of Disbursement																			
	Mailing Address 2800 Shirlington Road, Suite 930	<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>1</td><td>1</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	5	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	5	/	2	0	0	7												
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Consulting - PAC Article	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name	Category/Type																			
	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) American Express	Transaction ID: SB21B.74784 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>1</td><td>1</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	3	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	3	/	2	0	0	7												
	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>6.50</td></tr></table>	6.50																		
6.50																					
	Candidate Name	Category/Type																			
	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) American Express	Transaction ID: SB21B.74786 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>1</td><td>1</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	5	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	5	/	2	0	0	7												
	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>0.81</td></tr></table>	0.81																		
0.81																					
	Candidate Name	Category/Type																			
	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)	<table border="1"><tr><td>507.31</td></tr></table>	507.31
507.31		
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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 981540</p> <p>City El Paso State TX Zip Code 79998</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.74788</p> <p>Date of Disbursement 11 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 5.31</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 981540</p> <p>City El Paso State TX Zip Code 79998</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.74789</p> <p>Date of Disbursement 12 / 03 / 2007</p> <p>Amount of Each Disbursement this Period 0.81</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 981540</p> <p>City El Paso State TX Zip Code 79998</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.74795</p> <p>Date of Disbursement 12 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 1.63</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7.75

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.74796 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>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>7</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	4		2	0	7													
	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>8.12</td></tr></table>	8.12																		
8.12																					
	Candidate Name	Category/Type																			
	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) American Express	Transaction ID: SB21B.74798 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>1</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>7</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	8		2	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	8		2	0	7													
	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	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.74799 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>1</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	1		2	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	1		2	0	7													
	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>163.31</td></tr></table>	163.31																		
163.31																					
	Candidate Name	Category/Type																			
	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)	<table border="1"><tr><td>175.93</td></tr></table>	175.93
175.93		
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.74800 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>1</td><td>2</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	4		2	0	0	7												
	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>59.32</td></tr></table>	59.32																		
59.32																					
	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) Gary Bauer	Transaction ID: SB21B.74814 Date of Disbursement																			
	Mailing Address 2800 Shirlington Road	<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>7</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	4		2	0	0	7												
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Consulting - PAC Fundraising	<table border="1"><tr><td>8000.00</td></tr></table>	8000.00																		
8000.00																					
	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.74837 Date of Disbursement																			
	Mailing Address 2800 Shirlington Road	<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>8</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	8		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	8		2	0	0	7												
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Consulting - PAC Fundraising	<table border="1"><tr><td>8000.00</td></tr></table>	8000.00																		
8000.00																					
	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)	<table border="1"><tr><td>16059.32</td></tr></table>	16059.32
16059.32		
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) Gary Bauer	Transaction ID: SB21B.74855 Date of Disbursement 09 / 27 / 2007
	Mailing Address 2800 Shirlington Road	Amount of Each Disbursement this Period 4000.00
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement PAC - POLITICAL FUNDRAISING 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) Gary Bauer	Transaction ID: SB21B.79997 Date of Disbursement 10 / 26 / 2007
	Mailing Address 2800 Shirlington Road	Amount of Each Disbursement this Period 4000.00
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Consulting - PAC Fundraising 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.80014 Date of Disbursement 11 / 27 / 2007
	Mailing Address 2800 Shirlington Road	Amount of Each Disbursement this Period 4000.00
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Consulting - PAC Fundraising 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)	▶	12000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 178 / 229

<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Gary Bauer</p> <p>Mailing Address 2800 Shirlington Road</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement Consulting - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.80034</p> <p>Date of Disbursement 12 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 4000.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) BB&T</p> <p>Mailing Address P.O. Box 580363</p> <p>City Charlotte State NC Zip Code 28258</p> <p>Purpose of Disbursement Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.74744</p> <p>Date of Disbursement 07 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 5.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) BB&T</p> <p>Mailing Address P.O. Box 580363</p> <p>City Charlotte State NC Zip Code 28258</p> <p>Purpose of Disbursement Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.74735</p> <p>Date of Disbursement 07 / 22 / 2007</p> <p>Amount of Each Disbursement this Period 89.61</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4094.61

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.74749 Date of Disbursement																			
	Mailing Address P.O. Box 580363	<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>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	0	7												
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Bank Fees	<table border="1"><tr><td>5.00</td></tr></table>	5.00																		
5.00																					
	Candidate Name	Category/Type																			
	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) BB&T	Transaction ID: SB21B.74736 Date of Disbursement																			
	Mailing Address P.O. Box 580363	<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>8</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	2		2	0	0	7												
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Bank Fees	<table border="1"><tr><td>89.74</td></tr></table>	89.74																		
89.74																					
	Candidate Name	Category/Type																			
	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) BB&T	Transaction ID: SB21B.74752 Date of Disbursement																			
	Mailing Address P.O. Box 580363	<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>9</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	7		2	0	0	7												
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Bank Fees	<table border="1"><tr><td>5.00</td></tr></table>	5.00																		
5.00																					
	Candidate Name	Category/Type																			
	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)	<table border="1"><tr><td>99.74</td></tr></table>	99.74
99.74		
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) BB&T <hr/> Mailing Address P.O. Box 580363 <hr/> City Charlotte State NC Zip Code 28258 <hr/> Purpose of Disbursement Bank Fees Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.74737 Date of Disbursement 09 / 22 / 2007 <hr/> Amount of Each Disbursement this Period 97.73
B.	Full Name (Last, First, Middle Initial) BB&T <hr/> Mailing Address P.O. Box 580363 <hr/> City Charlotte State NC Zip Code 28258 <hr/> Purpose of Disbursement Bank Fees Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.74759 Date of Disbursement 10 / 02 / 2007 <hr/> Amount of Each Disbursement this Period 27.74
C.	Full Name (Last, First, Middle Initial) BB&T <hr/> Mailing Address P.O. Box 580363 <hr/> City Charlotte State NC Zip Code 28258 <hr/> Purpose of Disbursement Bank Fees Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.74761 Date of Disbursement 10 / 02 / 2007 <hr/> Amount of Each Disbursement this Period 14.26

SUBTOTAL of Disbursements This Page (optional)	139.73
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)

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<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.74769
	Mailing Address P.O. Box 580363	Date of Disbursement 10 / 15 / 2007
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 114.00
	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) ▼

B.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.74738
	Mailing Address P.O. Box 580363	Date of Disbursement 10 / 22 / 2007
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 99.18
	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) BB&T	Transaction ID: SB21B.74787
	Mailing Address P.O. Box 580363	Date of Disbursement 11 / 15 / 2007
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 435.27
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	648.45
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)

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<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.74739
	Mailing Address P.O. Box 580363	Date of Disbursement 11 / 30 / 2007
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 121.07
	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) ▼

B.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.74804
	Mailing Address P.O. Box 580363	Date of Disbursement 12 / 17 / 2007
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 175.37
	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) ▼

C.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.74740
	Mailing Address P.O. Box 580363	Date of Disbursement 12 / 31 / 2007
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 104.83
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	401.27
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)

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<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) CAPITOL ADVANTAGE	Transaction ID: SB21B.74856
	Mailing Address P.O. 1223	Date of Disbursement 10 / 03 / 2007
	City McLean State VA Zip Code 22101	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement DUES & SUBSCRIPTIONS WEBSITE	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) CAPITOL ADVANTAGE	Transaction ID: SB21B.80011
	Mailing Address P.O. 1223	Date of Disbursement 11 / 27 / 2007
	City McLean State VA Zip Code 22101	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement Dues and Subscriptions - Website	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) CITY OF ALEXANDRIA	Transaction ID: SB21B.74838
	Mailing Address Dept. 715	Date of Disbursement 09 / 08 / 2007
	City Alexandria State VA Zip Code 22334	Amount of Each Disbursement this Period 202.26
	Purpose of Disbursement Property Taxes	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)	3202.26
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)

PAGE 184 / 229

<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) COVAD COMMUNICATIONS	Transaction ID: SB21B.74821
	Mailing Address P.O. BOX 39000	Date of Disbursement 07 / 28 / 2007
	City SAN FRANCISCO State CA Zip Code 94139-0001	Amount of Each Disbursement this Period 102.47
	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) ▼

B.	Full Name (Last, First, Middle Initial) COVAD COMMUNICATIONS	Transaction ID: SB21B.74840
	Mailing Address P.O. BOX 39000	Date of Disbursement 09 / 08 / 2007
	City SAN FRANCISCO State CA Zip Code 94139-0001	Amount of Each Disbursement this Period 102.48
	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) COVAD COMMUNICATIONS	Transaction ID: SB21B.74861
	Mailing Address P.O. BOX 39000	Date of Disbursement 10 / 16 / 2007
	City SAN FRANCISCO State CA Zip Code 94139-0001	Amount of Each Disbursement this Period 102.48
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	307.43
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)

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<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) COVAD COMMUNICATIONS	Transaction ID: SB21B.79999 Date of Disbursement
	Mailing Address P.O. BOX 39000	<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
	City SAN FRANCISCO State CA Zip Code 94139-0001	Amount of Each Disbursement this Period
	Purpose of Disbursement Computer Services	<input type="text" value="102.48"/>
	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) COVAD COMMUNICATIONS	Transaction ID: SB21B.80020 Date of Disbursement
	Mailing Address P.O. BOX 39000	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
	City SAN FRANCISCO State CA Zip Code 94139-0001	Amount of Each Disbursement this Period
	Purpose of Disbursement Computer Services	<input type="text" value="102.48"/>
	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) COVINGTON & BURLING	Transaction ID: SB21B.80041 Date of Disbursement
	Mailing Address 1201 Pennsylvania Ave., NW	<input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
	City Washington State DC Zip Code 20044	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC - Legal Fees	<input type="text" value="672.00"/>
	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="876.96"/>
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)

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<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) COVINGTON & BURLING	Transaction ID: SB21B.80048 Date of Disbursement 11 / 27 / 2007	
	Mailing Address 1201 Pennsylvania Ave., NW		
	City Washington State DC Zip Code 20044	Amount of Each Disbursement this Period	1332.25
	Purpose of Disbursement PAC - Legal 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) ▼	
B.	Full Name (Last, First, Middle Initial) DEER PARK	Transaction ID: SB21B.74824 Date of Disbursement 08 / 06 / 2007	
	Mailing Address P.O. Box 52271		
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period	28.65
	Purpose of Disbursement OFFICE EXPENSE	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) DEER PARK	Transaction ID: SB21B.74841 Date of Disbursement 09 / 08 / 2007	
	Mailing Address P.O. Box 52271		
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period	29.67
	Purpose of Disbursement OFFICE EXPENSE	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) ▶

1390.57

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)

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

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

NAME OF COMMITTEE (In Full)
Campaign for Working Families

A.	Full Name (Last, First, Middle Initial) DEER PARK Mailing Address P.O. Box 52271 City Phoenix State AZ Zip Code 85072 Purpose of Disbursement OFFICE EXPENSE 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) ▼	Transaction ID: SB21B.74862 Date of Disbursement 10 / 16 / 2007	Amount of Each Disbursement this Period 24.55
B.	Full Name (Last, First, Middle Initial) DEER PARK Mailing Address P.O. Box 52271 City Phoenix State AZ Zip Code 85072 Purpose of Disbursement Office Expense 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) ▼	Transaction ID: SB21B.80003 Date of Disbursement 11 / 05 / 2007	Amount of Each Disbursement this Period 26.08
C.	Full Name (Last, First, Middle Initial) DEER PARK Mailing Address P.O. Box 52271 City Phoenix State AZ Zip Code 85072 Purpose of Disbursement Office Expense 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) ▼	Transaction ID: SB21B.80022 Date of Disbursement 12 / 12 / 2007	Amount of Each Disbursement this Period 26.08

SUBTOTAL of Disbursements This Page (optional) ▶

76.71

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)

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<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

<p>A. Full Name (Last, First, Middle Initial) DESIGN 4 INC.</p> <p>Mailing Address 2020 W. Bandon Blvd. Suite 202</p> <p>City Brandon State FL Zip Code 33511</p> <p>Purpose of Disbursement PAC - Printing and Reproduction</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.80062</p> <p>Date of Disbursement 09 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 1400.00</p>
<p>B. Full Name (Last, First, Middle Initial) DISCOVER FINANCIAL SERVICES</p> <p>Mailing Address P.O. Box 8181</p> <p>City Grey State TN Zip Code 37615</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.74781</p> <p>Date of Disbursement 11 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 55.23</p>
<p>C. Full Name (Last, First, Middle Initial) DISCOVER FINANCIAL SERVICES</p> <p>Mailing Address P.O. Box 8181</p> <p>City Grey State TN Zip Code 37615</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.74782</p> <p>Date of Disbursement 11 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 2.58</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1457.81

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)

PAGE 189 / 229

<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) DISCOVER FINANCIAL SERVICES	Transaction ID: SB21B.74785
	Mailing Address P.O. Box 8181	Date of Disbursement 11 / 14 / 2007
	City Grey State TN Zip Code 37615	Amount of Each Disbursement this Period 3.29
	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) DISCOVER FINANCIAL SERVICES	Transaction ID: SB21B.74791
	Mailing Address P.O. Box 8181	Date of Disbursement 12 / 04 / 2007
	City Grey State TN Zip Code 37615	Amount of Each Disbursement this Period 9.95
	Purpose of Disbursement CREDIT CARD PROCESSING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DISCOVER FINANCIAL SERVICES	Transaction ID: SB21B.74794
	Mailing Address P.O. Box 8181	Date of Disbursement 12 / 06 / 2007
	City Grey State TN Zip Code 37615	Amount of Each Disbursement this Period 1.33
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	14.57
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)

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<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) DISCOVER FINANCIAL SERVICES	Transaction ID: SB21B.74797
	Mailing Address P.O. Box 8181	Date of Disbursement 12 / 18 / 2007
	City Grey State TN Zip Code 37615	Amount of Each Disbursement this Period 0.71
	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) DISCOVER FINANCIAL SERVICES	Transaction ID: SB21B.74801
	Mailing Address P.O. Box 8181	Date of Disbursement 12 / 26 / 2007
	City Grey State TN Zip Code 37615	Amount of Each Disbursement this Period 11.41
	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) ▼

C.	Full Name (Last, First, Middle Initial) DISCOVER FINANCIAL SERVICES	Transaction ID: SB21B.74802
	Mailing Address P.O. Box 8181	Date of Disbursement 12 / 28 / 2007
	City Grey State TN Zip Code 37615	Amount of Each Disbursement this Period 6.20
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	18.32
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) DISCOVER FINANCIAL SERVICES	Transaction ID: SB21B.74803
	Mailing Address P.O. Box 8181	Date of Disbursement 12 / 31 / 2007
	City Grey State TN Zip Code 37615	Amount of Each Disbursement this Period 1.33
	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) FEDERAL EXPRESS	Transaction ID: SB21B.79977
	Mailing Address P.O. Box 1140	Date of Disbursement 10 / 16 / 2007
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period 42.74
	Purpose of Disbursement Shipping 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) FEDERAL EXPRESS	Transaction ID: SB21B.80004
	Mailing Address P.O. Box 1140	Date of Disbursement 11 / 05 / 2007
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period 36.48
	Purpose of Disbursement Shipping 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) ▼

SUBTOTAL of Disbursements This Page (optional)	80.55
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)
FEDERAL EXPRESS

Transaction ID: SB21B.80013
Date of Disbursement

Mailing Address P.O. Box 1140

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	7	7

City State Zip Code
Memphis TN 38101

Amount of Each Disbursement this Period

36.73

Purpose of Disbursement
Shipping Fees
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
FRC

Transaction ID: SB21B.74847
Date of Disbursement

Mailing Address 801 G STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	6	/	2	0	7	7

City State Zip Code
WASHINGTON DC 20002

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
RENT MEETING ROOM
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
FRC

Transaction ID: SB21B.74857
Date of Disbursement

Mailing Address 801 G STREET

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	7	7

City State Zip Code
WASHINGTON DC 20002

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
RENT - MEETING ROOM
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

236.73

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) HELLER INFORMATION SERVICES	Transaction ID: SB21B.79978
	Mailing Address 12450 Parklawn Drive	Date of Disbursement 10 / 16 / 2007
	City Rockville State MD Zip Code 20852	Amount of Each Disbursement this Period 299.00
	Purpose of Disbursement Computer 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 <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) INDEPENDENT PLAN COORDINATORS	Transaction ID: SB21B.74823
	Mailing Address P.O. Box 2747	Date of Disbursement 08 / 06 / 2007
	City Fairfax State VA Zip Code 22031	Amount of Each Disbursement this Period 972.50
	Purpose of Disbursement PLAN 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) INDEPENDENT PLAN COORDINATORS	Transaction ID: SB21B.79992
	Mailing Address P.O. Box 2747	Date of Disbursement 10 / 23 / 2007
	City Fairfax State VA Zip Code 22031	Amount of Each Disbursement this Period 22.50
	Purpose of Disbursement Plan 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:	

SUBTOTAL of Disbursements This Page (optional) ► **1294.00**

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A.

Full Name (Last, First, Middle Initial)
INKWELL, INC

Transaction ID: SB21B.80055
Date of Disbursement

Mailing Address 1973 COUNTY ROAD C2 WEST

07 / 28 / 2007

City ROSEVILLE State MN Zip Code 55113

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC - Direct Mail Postage

2858.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
INKWELL, INC

Transaction ID: SB21B.80056
Date of Disbursement

Mailing Address 1973 COUNTY ROAD C2 WEST

08 / 06 / 2007

City ROSEVILLE State MN Zip Code 55113

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC - Direct Mail Production

3190.31

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
INKWELL, INC

Transaction ID: SB21B.80058
Date of Disbursement

Mailing Address 1973 COUNTY ROAD C2 WEST

09 / 08 / 2007

City ROSEVILLE State MN Zip Code 55113

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC - Direct Mail Production

4398.73

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

10447.04

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) INKWELL, INC	Transaction ID: SB21B.80067 Date of Disbursement 11 / 02 / 2007	
	Mailing Address 1973 COUNTY ROAD C2 WEST		
	City ROSEVILLE State MN Zip Code 55113	Amount of Each Disbursement this Period	4733.21
	Purpose of Disbursement PAC - Direct Mail Postage		
	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) INKWELL, INC	Transaction ID: SB21B.80071 Date of Disbursement 12 / 12 / 2007	
	Mailing Address 1973 COUNTY ROAD C2 WEST		
	City ROSEVILLE State MN Zip Code 55113	Amount of Each Disbursement this Period	6868.13
	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) J and J Printing	Transaction ID: SB21B.74826 Date of Disbursement 08 / 24 / 2007	
	Mailing Address 5540 Port Royal Road		
	City Springfield State VA Zip Code 22151	Amount of Each Disbursement this Period	385.35
	Purpose of Disbursement PAC - LETTERHEAD GENERAL OFFICE		
	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)	11986.69
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)

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<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) J and J Printing	Transaction ID: SB21B.79993
	Mailing Address 5540 Port Royal Road	Date of Disbursement 10 / 23 / 2007
	City Springfield State VA Zip Code 22151	Amount of Each Disbursement this Period 807.45
	Purpose of Disbursement PAC - Printing General Office Letterhead	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) LEXIS NEXIS	Transaction ID: SB21B.80038
	Mailing Address P.O. Box 7247-7090	Date of Disbursement 08 / 24 / 2007
	City Philadelphia State PA Zip Code 19170	Amount of Each Disbursement this Period 350.00
	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) ▼

C.	Full Name (Last, First, Middle Initial) LEXIS NEXIS	Transaction ID: SB21B.80042
	Mailing Address P.O. Box 7247-7090	Date of Disbursement 09 / 26 / 2007
	City Philadelphia State PA Zip Code 19170	Amount of Each Disbursement this Period 350.00
	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)	1507.45
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)

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<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) LEXIS NEXIS	Transaction ID: SB21B.80045 Date of Disbursement																			
	Mailing Address P.O. Box 7247-7090	<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>1</td><td>0</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	6	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	6	/	2	0	0	7												
	City Philadelphia State PA Zip Code 19170	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Dues and Subscriptions	<table border="1"><tr><td>350.00</td></tr></table>	350.00																		
350.00																					
	Candidate Name	Category/Type																			
	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) LEXIS NEXIS	Transaction ID: SB21B.80049 Date of Disbursement																			
	Mailing Address P.O. Box 7247-7090	<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>1</td><td>1</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	7	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	2	7	/	2	0	0	7												
	City Philadelphia State PA Zip Code 19170	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Dues and Subscriptions	<table border="1"><tr><td>350.00</td></tr></table>	350.00																		
350.00																					
	Candidate Name	Category/Type																			
	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) LEXIS NEXIS	Transaction ID: SB21B.80051 Date of Disbursement																			
	Mailing Address P.O. Box 7247-7090	<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>1</td><td>2</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	2	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	2	/	2	0	0	7												
	City Philadelphia State PA Zip Code 19170	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Dues and Subscriptions	<table border="1"><tr><td>350.00</td></tr></table>	350.00																		
350.00																					
	Candidate Name	Category/Type																			
	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)	<table border="1"><tr><td>1050.00</td></tr></table>	1050.00
1050.00		
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)

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<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.80036 Date of Disbursement 07 / 24 / 2007
	Mailing Address P.O. BOX 2325	Amount of Each Disbursement this Period 20.00
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement PAC - Data Processing 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) LPS	Transaction ID: SB21B.80037 Date of Disbursement 08 / 06 / 2007
	Mailing Address P.O. BOX 2325	Amount of Each Disbursement this Period 653.33
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement PAC - Data 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) ▼

C.	Full Name (Last, First, Middle Initial) LPS	Transaction ID: SB21B.80039 Date of Disbursement 08 / 24 / 2007
	Mailing Address P.O. BOX 2325	Amount of Each Disbursement this Period 554.88
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement PAC - Data Processing 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)	▶	1228.21
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

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) LPS Mailing Address P.O. BOX 2325 City FAIRFAX State VA Zip Code 22031 Purpose of Disbursement PAC - Data Processing 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) ▼	Transaction ID: SB21B.80040 Date of Disbursement 09 / 08 / 2007 Amount of Each Disbursement this Period 286.26 Category/Type
B.	Full Name (Last, First, Middle Initial) 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: <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) ▼	Transaction ID: SB21B.80043 Date of Disbursement 09 / 27 / 2007 Amount of Each Disbursement this Period 123.88 Category/Type
C.	Full Name (Last, First, Middle Initial) 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: <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) ▼	Transaction ID: SB21B.80044 Date of Disbursement 10 / 05 / 2007 Amount of Each Disbursement this Period 100.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	510.14
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)

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<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 Mailing Address P.O. BOX 2325 City FAIRFAX State VA Zip Code 22031 Purpose of Disbursement PAC - Data Processing Services 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) ▼	Transaction ID: SB21B.80046 Date of Disbursement 10 / 16 / 2007 Amount of Each Disbursement this Period 168.04	
B.	Full Name (Last, First, Middle Initial) 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: <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) ▼	Transaction ID: SB21B.80047 Date of Disbursement 10 / 26 / 2007 Amount of Each Disbursement this Period 198.67	
C.	Full Name (Last, First, Middle Initial) 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: <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) ▼	Transaction ID: SB21B.80050 Date of Disbursement 11 / 27 / 2007 Amount of Each Disbursement this Period 555.23	

SUBTOTAL of Disbursements This Page (optional)		921.94	
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)

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<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.80053 Date of Disbursement 12 / 12 / 2007
	Mailing Address P.O. BOX 2325	Amount of Each Disbursement this Period 1028.75
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement PAC - Data Processing 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) MANAGEMENT INFO SERVICES	Transaction ID: SB21B.74842 Date of Disbursement 09 / 24 / 2007
	Mailing Address 2800 SHIRLINGTON RD 7TH FL	Amount of Each Disbursement this Period 325.00
	City ARLINGTON State VA Zip Code 22206	
	Purpose of Disbursement PURCHASE OFFICE FURNITURE	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) MGP Shirlington Gateway	Transaction ID: SB21B.74809 Date of Disbursement 07 / 24 / 2007
	Mailing Address P.O. Box 201630	Amount of Each Disbursement this Period 2382.89
	City Dallas State TX Zip Code 75320	
	Purpose of Disbursement Rent	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)	3736.64
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)

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<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) MGP Shirlington Gateway	Transaction ID: SB21B.74833
	Mailing Address P.O. Box 201630	Date of Disbursement 08 / 28 / 2007
	City Dallas State TX Zip Code 75320	Amount of Each Disbursement this Period 2382.89
	Purpose of Disbursement RENT	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) MGP Shirlington Gateway	Transaction ID: SB21B.74844
	Mailing Address P.O. Box 201630	Date of Disbursement 09 / 26 / 2007
	City Dallas State TX Zip Code 75320	Amount of Each Disbursement this Period 2382.89
	Purpose of Disbursement RENT	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) MGP Shirlington Gateway	Transaction ID: SB21B.79994
	Mailing Address P.O. Box 201630	Date of Disbursement 10 / 26 / 2007
	City Dallas State TX Zip Code 75320	Amount of Each Disbursement this Period 2382.89
	Purpose of Disbursement Rent	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)	7148.67
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)

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<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) MGP Shirlington Gateway	Transaction ID: SB21B.80008
	Mailing Address P.O. Box 201630	Date of Disbursement 11 / 27 / 2007
	City Dallas State TX Zip Code 75320	Amount of Each Disbursement this Period 2382.89
	Purpose of Disbursement REnt	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) MGP Shirlington Gateway	Transaction ID: SB21B.80025
	Mailing Address P.O. Box 201630	Date of Disbursement 12 / 27 / 2007
	City Dallas State TX Zip Code 75320	Amount of Each Disbursement this Period 45.00
	Purpose of Disbursement Rent	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) MILLERS OFFICE SUPPLY	Transaction ID: SB21B.79979
	Mailing Address P.O. Box 990098	Date of Disbursement 10 / 16 / 2007
	City Hartford State CT Zip Code 06199	Amount of Each Disbursement this Period 45.20
	Purpose of Disbursement Office Supplies	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)	▶	2473.09
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)

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<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) MILLERS OFFICE SUPPLY <hr/> Mailing Address P.O. Box 990098 <hr/> City Hartford State CT Zip Code 06199 <hr/> Purpose of Disbursement Office Supplies Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.79989 Date of Disbursement 10 / 16 / 2007	Amount of Each Disbursement this Period 428.16
B.	Full Name (Last, First, Middle Initial) MILLERS OFFICE SUPPLY <hr/> Mailing Address P.O. Box 990098 <hr/> City Hartford State CT Zip Code 06199 <hr/> Purpose of Disbursement Office Supplies Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.80023 Date of Disbursement 12 / 12 / 2007	Amount of Each Disbursement this Period 91.27
C.	Full Name (Last, First, Middle Initial) Bill Moeller <hr/> Mailing Address 2800 Shirlington Road #930 <hr/> City Arlington State VA Zip Code 22206 <hr/> Purpose of Disbursement Consulting - Political Researcher Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.74811 Date of Disbursement 07 / 24 / 2007	Amount of Each Disbursement this Period 2300.00

SUBTOTAL of Disbursements This Page (optional) ► **2819.43**

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)

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<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bill Moeller</p> <p>Mailing Address 2800 Shirlington Road #930</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement Consulting - Political Researcher</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.74834</p> <p>Date of Disbursement 08 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 2300.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bill Moeller</p> <p>Mailing Address 2800 Shirlington Road #930</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement PAC - POLITICAL RESEARCHER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.74853</p> <p>Date of Disbursement 09 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 1150.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bill Moeller</p> <p>Mailing Address 2800 Shirlington Road #930</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement Travel Expense Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.79991</p> <p>Date of Disbursement 10 / 23 / 2007</p> <p>Amount of Each Disbursement this Period 21.31</p>

SUBTOTAL of Disbursements This Page (optional)	3471.31
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.79995 Date of Disbursement
	Mailing Address 2800 Shirlington Road #930	<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting - Political Researcher	<input type="text" value="1150.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Bill Moeller	Transaction ID: SB21B.80010 Date of Disbursement
	Mailing Address 2800 Shirlington Road #930	<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting - Political Researcher	<input type="text" value="1150.00"/>
	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) Bill Moeller	Transaction ID: SB21B.80031 Date of Disbursement
	Mailing Address 2800 Shirlington Road #930	<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting - Political Researcher	<input type="text" value="1150.00"/>
	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="3450.00"/>
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)

<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) NATIONAL JOURNAL	Transaction ID: SB21B.74827
	Mailing Address 1501 M Street, NW	Date of Disbursement 08 / 24 / 2007
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 89.19
	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) ▼

B.	Full Name (Last, First, Middle Initial) NATIONAL JOURNAL	Transaction ID: SB21B.74848
	Mailing Address 1501 M Street, NW	Date of Disbursement 09 / 26 / 2007
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 1645.00
	Purpose of Disbursement DUES & 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) ▼

C.	Full Name (Last, First, Middle Initial) PINNACLE LIST CO.	Transaction ID: SB21B.80006
	Mailing Address 2800 Shirlington Road 9th Floor	Date of Disbursement 11 / 09 / 2007
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period 1370.00
	Purpose of Disbursement PAC - Direct Mail List Rental	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)	3104.19
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)

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<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) PMC	Transaction ID: SB21B.80261 Date of Disbursement 11 / 30 / 2007
	Mailing Address 7201 Lockport Place	Amount of Each Disbursement this Period 1989.67
	City Lorton State VA Zip Code 22079	
	Purpose of Disbursement PAC - Direct Mail Postage	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) PR Newswire	Transaction ID: SB21B.74858 Date of Disbursement 10 / 03 / 2007
	Mailing Address P.O. Box 5897	Amount of Each Disbursement this Period 120.00
	City New York State NY Zip Code 10087	
	Purpose of Disbursement PRESS RELEASE	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) PR Newswire	Transaction ID: SB21B.79980 Date of Disbursement 10 / 16 / 2007
	Mailing Address P.O. Box 5897	Amount of Each Disbursement this Period 120.00
	City New York State NY Zip Code 10087	
	Purpose of Disbursement Press Release	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)	2229.67
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) RECORDS MGMT INC Mailing Address 7726 Southern Drive City Springfield State VA Zip Code 22150 Purpose of Disbursement Storage Fees 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) ▼	Transaction ID: SB21B.79990 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 187.23
B.	Full Name (Last, First, Middle Initial) RECORDS MGMT INC Mailing Address 7726 Southern Drive City Springfield State VA Zip Code 22150 Purpose of Disbursement Storage Fees 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) ▼	Transaction ID: SB21B.80009 Date of Disbursement: M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 7 Amount of Each Disbursement this Period 187.23
C.	Full Name (Last, First, Middle Initial) RECORDS MGMT INC Mailing Address 7726 Southern Drive City Springfield State VA Zip Code 22150 Purpose of Disbursement Storage Fees 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) ▼	Transaction ID: SB21B.80026 Date of Disbursement: M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 7 Amount of Each Disbursement this Period 187.23

SUBTOTAL of Disbursements This Page (optional)	561.69
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)

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<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) RST Marketing <hr/> Mailing Address P.O. Box 228 <hr/> City Forest State VA Zip Code 24551 <hr/> Purpose of Disbursement PAC - Direct Mail Postage Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.80256 Date of Disbursement 11 / 21 / 2007
	Amount of Each Disbursement this Period 8526.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:

B. Full Name (Last, First, Middle Initial) SPRINT <hr/> Mailing Address P.O. Box 530503 <hr/> City Atlanta State GA Zip Code 30353 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.79984 Date of Disbursement 10 / 16 / 2007
	Amount of Each Disbursement this Period 28.20
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:

C. Full Name (Last, First, Middle Initial) SPRINT <hr/> Mailing Address P.O. Box 530503 <hr/> City Atlanta State GA Zip Code 30353 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.80015 Date of Disbursement 11 / 27 / 2007
	Amount of Each Disbursement this Period 22.04
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:

SUBTOTAL of Disbursements This Page (optional) ▶	8576.24
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

<p>A. Full Name (Last, First, Middle Initial) SPRINT</p> <p>Mailing Address P.O. Box 530503</p> <p>City Atlanta State GA Zip Code 30353</p> <p>Purpose of Disbursement TELEPHONE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.80028</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="16.65"/></p>
<p>B. Full Name (Last, First, Middle Initial) Susan B. Anthony List</p> <p>Mailing Address 1800 N Kent Street</p> <p>City Arlington State VA Zip Code 22209</p> <p>Purpose of Disbursement PAC - Gala Event Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.80242</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) THE HARTFORD</p> <p>Mailing Address P.O. Box 659519</p> <p>City San Antonio State TX Zip Code 78265</p> <p>Purpose of Disbursement LIABILITY INSURANCE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.74830</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="225.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="2741.65"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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) THE LUKENS COMPANY'	Transaction ID: SB21B.80060
	Mailing Address 2800 Shirlington Road 9th Floor	Date of Disbursement 09 / 08 / 2007
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period 2600.00
	Purpose of Disbursement PAC - Direct Mail Consulting	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) THE LUKENS COMPANY'	Transaction ID: SB21B.80069
	Mailing Address 2800 Shirlington Road 9th Floor	Date of Disbursement 11 / 27 / 2007
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period 2600.00
	Purpose of Disbursement PAC - Direct Mail Consulting	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) THE LUKENS COMPANY'	Transaction ID: SB21B.80073
	Mailing Address 2800 Shirlington Road 9th Floor	Date of Disbursement 12 / 12 / 2007
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period 2600.00
	Purpose of Disbursement PAC - Direct Mail Consulting	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)	7800.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A.	Full Name (Last, First, Middle Initial) The Mail Haus	Transaction ID: SB21B.79985 Date of Disbursement																			
	Mailing Address 1709 Suburban Drive	<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>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	6		2	0	0	7												
	City DePere State WI Zip Code 54115	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC - Direct Mail Postage	<table border="1"><tr><td>2949.85</td></tr></table>	2949.85																		
2949.85																					
	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) US POSTMASTER	Transaction ID: SB21B.74805 Date of Disbursement																			
	Mailing Address Main Post Office	<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>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	1		2	0	0	7												
	City Washington State DC Zip Code 20000	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC Postage - Replenish BRE Acct.	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	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) US POSTMASTER	Transaction ID: SB21B.80005 Date of Disbursement																			
	Mailing Address Main Post Office	<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>1</td><td>1</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	6		2	0	0	7												
	City Washington State DC Zip Code 20000	Amount of Each Disbursement this Period																			
	Purpose of Disbursement General Office Postage	<table border="1"><tr><td>820.00</td></tr></table>	820.00																		
820.00																					
	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)	<table border="1"><tr><td>4269.85</td></tr></table>	4269.85
4269.85		
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) US POSTMASTER	Transaction ID: SB21B.74807 Date of Disbursement
	Mailing Address Main Post Office	<input type="text" value="11"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Washington State DC Zip Code 20000	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Postage - Replenish BRE Acct.	<input type="text" value="500.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) US POSTMASTER	Transaction ID: SB21B.80019 Date of Disbursement
	Mailing Address Main Post Office	<input type="text" value="12"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Washington State DC Zip Code 20000	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC - General Office Postage	<input type="text" value="410.00"/>
	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) Dorie Velezis	Transaction ID: SB21B.74812 Date of Disbursement
	Mailing Address 2800 Shirlington Road #930	<input type="text" value="07"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting Services	<input type="text" value="2000.00"/>
	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="2910.00"/>
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)

<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) Dorie Velezis	Transaction ID: SB21B.74835 Date of Disbursement 08 / 28 / 2007
	Mailing Address 2800 Shirlington Road #930	Amount of Each Disbursement this Period 2000.00
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Accounting 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) Dorie Velezis	Transaction ID: SB21B.74854 Date of Disbursement 09 / 27 / 2007
	Mailing Address 2800 Shirlington Road #930	Amount of Each Disbursement this Period 1000.00
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement ACCOUNTING 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) Dorie Velezis	Transaction ID: SB21B.79996 Date of Disbursement 10 / 26 / 2007
	Mailing Address 2800 Shirlington Road #930	Amount of Each Disbursement this Period 1000.00
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Accounting 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) ▼

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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) Dorie Velezis	Transaction ID: SB21B.80012 Date of Disbursement 11 / 27 / 2007
	Mailing Address 2800 Shirlington Road #930	Amount of Each Disbursement this Period 1000.00
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Accounting 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) Dorie Velezis	Transaction ID: SB21B.80033 Date of Disbursement 12 / 28 / 2007
	Mailing Address 2800 Shirlington Road #930	Amount of Each Disbursement this Period 1000.00
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Accounting 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) VERIZON	Transaction ID: SB21B.74819 Date of Disbursement 07 / 24 / 2007
	Mailing Address P.O. Box 17577	Amount of Each Disbursement this Period 411.07
	City Baltimore State MD Zip Code 21297	
	Purpose of Disbursement Telephone 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)	▶	2411.07
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)

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<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.74831
	Mailing Address P.O. Box 17577	Date of Disbursement 08 / 24 / 2007
	City Baltimore State MD Zip Code 21297	Amount of Each Disbursement this Period 399.83
	Purpose of Disbursement TELEPHONE	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) VERIZON	Transaction ID: SB21B.74850
	Mailing Address P.O. Box 17577	Date of Disbursement 09 / 26 / 2007
	City Baltimore State MD Zip Code 21297	Amount of Each Disbursement this Period 401.48
	Purpose of Disbursement TELEPHONE	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) VERIZON	Transaction ID: SB21B.79987
	Mailing Address P.O. Box 17577	Date of Disbursement 10 / 16 / 2007
	City Baltimore State MD Zip Code 21297	Amount of Each Disbursement this Period 415.09
	Purpose of Disbursement Telephone	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)	▶	1216.40
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)

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<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) VERIZON</p> <p>Mailing Address P.O. Box 17577</p> <p>City Baltimore State MD Zip Code 21297</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.80016</p> <p>Date of Disbursement 11 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 416.89</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) VERIZON</p> <p>Mailing Address P.O. Box 17577</p> <p>City Baltimore State MD Zip Code 21297</p> <p>Purpose of Disbursement TELEPHONE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.80029</p> <p>Date of Disbursement 12 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 408.70</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Dean Virag</p> <p>Mailing Address 14039 Westwind Lane</p> <p>City Culpeper State VA Zip Code 22701</p> <p>Purpose of Disbursement Website Support</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.74808</p> <p>Date of Disbursement 07 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 350.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1175.59

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)

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<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Dean Virag</p> <p>Mailing Address 14039 Westwind Lane</p> <p>City Culpeper State VA Zip Code 22701</p> <p>Purpose of Disbursement WEBSITE SUPPORT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.74822</p> <p>Date of Disbursement 07 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 350.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Dean Virag</p> <p>Mailing Address 14039 Westwind Lane</p> <p>City Culpeper State VA Zip Code 22701</p> <p>Purpose of Disbursement WEBSITE SUPPORT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.74839</p> <p>Date of Disbursement 09 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 350.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Dean Virag</p> <p>Mailing Address 14039 Westwind Lane</p> <p>City Culpeper State VA Zip Code 22701</p> <p>Purpose of Disbursement WEBSITE SUPPORT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.74859</p> <p>Date of Disbursement 10 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 350.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1050.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Working Families

A.	Full Name (Last, First, Middle Initial) Dean Virag Mailing Address 14039 Westwind Lane City Culpoper State VA Zip Code 22701 Purpose of Disbursement Website Support 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) ▼	Transaction ID: SB21B.80002 Date of Disbursement 11 / 05 / 2007	Amount of Each Disbursement this Period 350.00
B.	Full Name (Last, First, Middle Initial) Dean Virag Mailing Address 14039 Westwind Lane City Culpoper State VA Zip Code 22701 Purpose of Disbursement Website Support 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) ▼	Transaction ID: SB21B.80021 Date of Disbursement 12 / 12 / 2007	Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) WASHINGTON INTELLIGENCE BUREAU Mailing Address 4128 PEPSI PLACE City CHANTILLY State VA Zip Code 20151 Purpose of Disbursement PAC - CAGING AND DATA ENTRY 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) ▼	Transaction ID: SB21B.74820 Date of Disbursement 07 / 24 / 2007	Amount of Each Disbursement this Period 1331.25

SUBTOTAL of Disbursements This Page (optional) ▶	2181.25
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)

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<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) WASHINGTON INTELLIGENCE BUREAU	Transaction ID: SB21B.74832
	Mailing Address 4128 PEPSI PLACE	Date of Disbursement 08 / 24 / 2007
	City CHANTILLY State VA Zip Code 20151	Amount of Each Disbursement this Period 791.17
	Purpose of Disbursement PAC - CAGING AND DATA ENTRY	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) WASHINGTON INTELLIGENCE BUREAU	Transaction ID: SB21B.74852
	Mailing Address 4128 PEPSI PLACE	Date of Disbursement 09 / 27 / 2007
	City CHANTILLY State VA Zip Code 20151	Amount of Each Disbursement this Period 779.24
	Purpose of Disbursement PAC - CAGING & DATA ENTRY	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.79998
	Mailing Address 4128 PEPSI PLACE	Date of Disbursement 10 / 26 / 2007
	City CHANTILLY State VA Zip Code 20151	Amount of Each Disbursement this Period 1326.09
	Purpose of Disbursement PAC - Caging and Data Entry	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)	▶	2896.50
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)

PAGE 223 / 229

<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)
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
PAC - Caging & Data Entry

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.80017

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	7

Amount of Each Disbursement this Period

1122.43

B. Full Name (Last, First, Middle Initial)
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
PAC - CAGING AND DATA ENTRY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.80030

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	7	/	2	0	0	7

Amount of Each Disbursement this Period

1575.13

SUBTOTAL of Disbursements This Page (optional) ►

2697.56

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

148379.14

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 224 / 229
	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 DIRECTECH, INC	Nature of Debt (Purpose): Caging & Data Processing
Mailing Address 8595 Grovemont Circle	
City Gaithersburg State MD ZIP Code 20877	

Outstanding Balance Beginning This Period <input type="text" value="223.11"/>	Transaction ID: SD10.42032	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="223.11"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor INKWELL, INC	Nature of Debt (Purpose): PAC - DIRECT MAIL PRODUCT-ION
Mailing Address 1973 COUNTY ROAD C2 WEST	
City ROSEVILLE State MN ZIP Code 55113	

Outstanding Balance Beginning This Period <input type="text" value="3190.31"/>	Transaction ID: SD10.74712	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3190.31"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor INKWELL, INC	Nature of Debt (Purpose): PAC - Direct Mail Postage
Mailing Address 1973 COUNTY ROAD C2 WEST	
City ROSEVILLE State MN ZIP Code 55113	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: SD10.80054	
Amount Incurred This Period <input type="text" value="2858.00"/>	Payment This Period <input type="text" value="2858.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="223.11"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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 INKWELL, INC			Nature of Debt (Purpose): PAC - Direct Mail Production
Mailing Address 1973 COUNTY ROAD C2 WEST			
City ROSEVILLE	State MN	ZIP Code 55113	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.80057	
Amount Incurred This Period <input type="text" value="4398.73"/>	Payment This Period <input type="text" value="4398.73"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor INKWELL, INC			Nature of Debt (Purpose): PAC - Direct Mail Postage
Mailing Address 1973 COUNTY ROAD C2 WEST			
City ROSEVILLE	State MN	ZIP Code 55113	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.80064	
Amount Incurred This Period <input type="text" value="4733.21"/>	Payment This Period <input type="text" value="4733.21"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor INKWELL, INC			Nature of Debt (Purpose): PAC - Direct Mail Production
Mailing Address 1973 COUNTY ROAD C2 WEST			
City ROSEVILLE	State MN	ZIP Code 55113	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.80070	
Amount Incurred This Period <input type="text" value="6868.13"/>	Payment This Period <input type="text" value="6868.13"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

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

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 MWM Direct Marketing Services			Nature of Debt (Purpose): Direct Mail
Mailing Address 8048 Hillrise Court			
City Elkridge	State MD	ZIP Code 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	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PMC			Nature of Debt (Purpose): PAC - Direct Mail Postage
Mailing Address 7201 Lockport Place			
City Lorton	State VA	ZIP Code 22079	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.80259	
Amount Incurred This Period 1989.67	Payment This Period 1989.67	Outstanding Balance at Close of This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RST Marketing			Nature of Debt (Purpose): PAC - Direct Mail Postage
Mailing Address P.O. Box 228			
City Forest	State VA	ZIP Code 24551	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.80255	
Amount Incurred This Period 8526.00	Payment This Period 8526.00	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	2320.90
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)

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 RST Marketing			Nature of Debt (Purpose): PAC - Direct Mail Production
Mailing Address P.O. Box 228			
City Forest	State VA	ZIP Code 24551	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.80257	
Amount Incurred This Period <input type="text" value="7580.14"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7580.14"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LUKENS COMPANY'			Nature of Debt (Purpose): PAC - Direct Mail Consulting
Mailing Address 2800 Shirlington Road 9th Floor			
City Arlington	State VA	ZIP Code 22206	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.80059	
Amount Incurred This Period <input type="text" value="2600.00"/>	Payment This Period <input type="text" value="2600.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LUKENS COMPANY'			Nature of Debt (Purpose): PAC - Direct Mail Consulting
Mailing Address 2800 Shirlington Road 9th Floor			
City Arlington	State VA	ZIP Code 22206	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.80068	
Amount Incurred This Period <input type="text" value="2600.00"/>	Payment This Period <input type="text" value="2600.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="7580.14"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 228 / 229
	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 LUKENS COMPANY'	Nature of Debt (Purpose): PAC - Direct Mail Fundraising
Mailing Address 2800 Shirlington Road 9th Floor	
City State ZIP Code Arlington VA 22206	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: SD10.80072	
Amount Incurred This Period <input type="text" value="2600.00"/>	Payment This Period <input type="text" value="2600.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LUKENS COMPANY'	Nature of Debt (Purpose): PAC - Direct Mail Consulting
Mailing Address 2800 Shirlington Road 9th Floor	
City State ZIP Code Arlington VA 22206	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: SD10.80253	
Amount Incurred This Period <input type="text" value="2600.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2600.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="2600.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="12724.15"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="12724.15"/>

Image# 28990415853

Form/Schedule: **SA11AI** Exess contribution of \$100 to be refunded - will appear on the February monthly report.

Transaction ID: **SA11AI.81237**
