

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

AMERICAN WORKING FAMILIES

ADDRESS (number and street)

107 SOUTH WEST STREET #527

☐ Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00511915

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☒ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2013

through

M M M / D D D / Y Y Y Y Y Y  
12 31 2013

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

Type or Print Name of Treasurer Bud Jackson

Signature of Treasurer

Bud Jackson

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
01 24 2014

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**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

AMERICAN WORKING FAMILIES

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2013</span>		<span style="border: 1px solid black; padding: 2px;">451.97</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">352.37</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">1237998.00</span>	<span style="border: 1px solid black; padding: 2px;">1237988.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">1238350.37</span>	<span style="border: 1px solid black; padding: 2px;">1238439.97</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">1234317.38</span>	<span style="border: 1px solid black; padding: 2px;">1234406.98</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">4032.99</span>	<span style="border: 1px solid black; padding: 2px;">4032.99</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">3000.00</span>	



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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**AMERICAN WORKING FAMILIES**

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2013

To:

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2013

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	862000.00	862000.00
(ii) Unitemized .....	0.00	-10.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	862000.00	861990.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	374998.00	374998.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1236998.00	1236988.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1000.00	1000.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1237998.00	1237988.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1237998.00	1237988.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	66338.99	66428.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	66338.99	66428.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	1167978.39	1167978.39
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1234317.38	1234406.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1234317.38	1234406.98

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1236998.00	1236988.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1236998.00	1236988.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	66338.99	66428.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	66338.99	66428.59

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

## **A. American Federation of State County and Municipal Employees**

Mailing Address 1625 L Street, NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

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

**Transaction ID : SA11AI.4270**

Amount of Each Receipt this Period

50000.00

Full Name (Last, First, Middle Initial)

## **B. American Federation of State County and Municipal Employees**

Mailing Address 1625 L Street, NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

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

**Transaction ID : SA11AI.4286**

Amount of Each Receipt this Period

50000.00

Full Name (Last, First, Middle Initial)

## **C. Boilermakers-Blacksmiths Legislative Education-Action Program**

Mailing Address 753 State Street

City State Zip Code  
Kansas City KS 66101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 17 / 2013

**Transaction ID : SA11AI.4219**

Amount of Each Receipt this Period

5000.00

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

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

105000.00

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

## **A. Boilermakers-Blacksmiths Legislative Education-Action Program**

Mailing Address 753 State Street

City State Zip Code  
 Kansas City KS 66101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 01 / 2013

**Transaction ID : SA11AI.4297**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B. Boston Firefighters Local 718**

Mailing Address 60 Hallet Street

City State Zip Code  
 Dorchester Ctr MA 02124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

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

**Transaction ID : SA11AI.4181**

Amount of Each Receipt this Period

30000.00

Full Name (Last, First, Middle Initial)

## **c. Boston Firefighters Local 718**

Mailing Address 60 Hallet Street

City State Zip Code  
 Dorchester Ctr MA 02124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60000.00

Date of Receipt

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

**Transaction ID : SA11AI.4256**

Amount of Each Receipt this Period

30000.00

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

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

62500.00

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

## **A. Bridge and Structural Iron Workers Union Local 7**

Mailing Address 195 Old Colony Avenue

City State Zip Code  
Boston MA 02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

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

**Transaction ID : SA11AI.4203**

Amount of Each Receipt this Period

30000.00

Full Name (Last, First, Middle Initial)

## **B. Bridge and Structural Iron Workers Union Local 7**

Mailing Address 195 Old Colony Avenue

City State Zip Code  
Boston MA 02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60000.00

Date of Receipt

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

**Transaction ID : SA11AI.4258**

Amount of Each Receipt this Period

30000.00

Full Name (Last, First, Middle Initial)

## **C. International Association of Fire Fighters**

Mailing Address 1750 New York Avenue, NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

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

**Transaction ID : SA11AI.4272**

Amount of Each Receipt this Period

15000.00

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

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

75000.00



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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. James F. Kelley**

Mailing Address 12 Charles Place

City  
Milton

State  
MA

Zip Code  
02186

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Thornton & Naumes, LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 16 / 2013

Transaction ID : SA11AI.4267

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. James F. Kelley**

Mailing Address 12 Charles Place

City  
Milton

State  
MA

Zip Code  
02186

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Thornton & Naumes, LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

11 / 01 / 2013

Transaction ID : SA11AI.4295

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. LIUNA**

Mailing Address 905 16th Street, NW

City  
Washington

State  
DC

Zip Code  
20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

08 / 21 / 2013

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period

100000.00

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

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

106000.00

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. LIUNA**

Mailing Address 905 16th Street, NW

City  
Washington

State Zip Code  
DC 20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 16 / 2013

Transaction ID : SA11AI.4264

Amount of Each Receipt this Period

150000.00

Full Name (Last, First, Middle Initial)

**B. Catherine McDonnell**

Mailing Address 63 Atlantic Ave  
#7E

City  
Boston

State Zip Code  
MA 02110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 24 / 2013

Transaction ID : SA11AI.4280

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. John J McDonnell**

Mailing Address 63 Atlantic Ave  
#7E

City  
Boston

State Zip Code  
MA 02110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Owner

Fifth Generation Spirits Inc.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : SA11AI.4183

Amount of Each Receipt this Period

2500.00

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

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

153500.00

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Ciaran Joseph McNelis**

Mailing Address 600 E 4th St

City  
Boston

State  
MA

Zip Code  
02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cronin Group LLC

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

08 / 30 / 2013

Transaction ID : SA11AI.4177

Amount of Each Receipt this Period

25000.00

Full Name (Last, First, Middle Initial)

**B. National Associatino of Government Employees**

Mailing Address 159 Burgin Parkway

City  
Quincy

State  
MA

Zip Code  
02169

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

09 / 17 / 2013

Transaction ID : SA11AI.4217

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

**C. National Associatino of Government Employees**

Mailing Address 159 Burgin Parkway

City  
Quincy

State  
MA

Zip Code  
02169

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

10 / 24 / 2013

Transaction ID : SA11AI.4282

Amount of Each Receipt this Period

10000.00

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

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

45000.00

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Darin S Samaraweera**

Mailing Address 79 Florence St  
Apt 202

City State Zip Code  
Chestnut Hill MA 02467

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KSS Realty Partners, Inc.

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

**Transaction ID : SA11AI.4188**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. SEIU Local 509 PAC**

Mailing Address 100 Talcott Avenue

City State Zip Code  
Watertown MA 02472

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

**Transaction ID : SA11AI.4224**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**c. Sprinkler Fitters Local 550**

Mailing Address 46 Rockland Street

City State Zip Code  
Boston MA 02132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

**Transaction ID : SA11AI.4201**

Amount of Each Receipt this Period

5000.00

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

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

15000.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

## **A. Thornton & Naumes, LLP**

Mailing Address 100 Summer Street  
30th Floor

City State Zip Code  
Boston MA 02110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

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

**Transaction ID : SA11AI.4233**

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

## **B. United Association of Journeymen and Pipefitters**

Mailing Address 3 Park Place

City State Zip Code  
Annapolis MD 21401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 28 / 2013

**Transaction ID : SA11AI.4171**

Amount of Each Receipt this Period

100000.00

Full Name (Last, First, Middle Initial)

## **C. United Association of Journeymen and Pipefitters**

Mailing Address 3 Park Place

City State Zip Code  
Annapolis MD 21401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

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

**Transaction ID : SA11AI.4259**

Amount of Each Receipt this Period

100000.00

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

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

210000.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

## **A. United Steel Workers**

Mailing Address 5 Gateway Center

City

Pittsburgh

State

PA

Zip Code

15222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

40000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 24 / 2013

**Transaction ID : SA11AI.4278**

Amount of Each Receipt this Period

40000.00

Full Name (Last, First, Middle Initial)

## **B. Wayne Roofing Systems LLC**

Mailing Address 65 E Belcher Road

City

Foxborough

State

MA

Zip Code

02035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 16 / 2013

**Transaction ID : SA11AI.4265**

Amount of Each Receipt this Period

50000.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

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

90000.00

862000.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

## **A. AMALGAMATED TRANSIT UNION - COPE**

Mailing Address 5025 WISCONSIN AVE NW

City State Zip Code  
WASHINGTON DC 20016

FEC ID number of contributing  
federal political committee.

**C** C00032995

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

**09** / **13** / **2013**

**Transaction ID : SA11C.4199**

Amount of Each Receipt this Period

20000.00

Full Name (Last, First, Middle Initial)

## **B. D.R.I.V.E. - DEMOCRAT, REPUBLICAN, INDEPENDENT VOTER EDUCATION (THE PAC OF THE INTERNATION**

Mailing Address 25 LOUISIANA AVE., NW

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00032979

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14999.00

Date of Receipt

**09** / **16** / **2013**

**Transaction ID : SA11C.4213**

Amount of Each Receipt this Period

14999.00

Full Name (Last, First, Middle Initial)

## **C. D.R.I.V.E. - DEMOCRAT, REPUBLICAN, INDEPENDENT VOTER EDUCATION (THE PAC OF THE INTERNATION**

Mailing Address 25 LOUISIANA AVE., NW

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00032979

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

29998.00

Date of Receipt

**10** / **30** / **2013**

**Transaction ID : SA11C.4291**

Amount of Each Receipt this Period

14999.00

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

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

49998.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

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

Mailing Address 1125 17TH ST, NW

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00029504

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75000.00

Date of Receipt

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

**Transaction ID : SA11C.4229**

Amount of Each Receipt this Period

75000.00

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

Mailing Address 7234 PARKWAY DRIVE

City State Zip Code  
HANOVER MD 21076

FEC ID number of contributing  
federal political committee.

**C** C00000885

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 05 / 2013

**Transaction ID : SA11C.4186**

Amount of Each Receipt this Period

50000.00

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

Mailing Address 7234 PARKWAY DRIVE

City State Zip Code  
HANOVER MD 21076

FEC ID number of contributing  
federal political committee.

**C** C00000885

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

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

**Transaction ID : SA11C.4231**

Amount of Each Receipt this Period

50000.00

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

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

175000.00



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

## **A. INTL UNION OF BRICKLAYERS & ALLIED CRAFTWORKERS PAC**

Mailing Address 620 F STREET, NW  
SUITE 900

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00003632

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**09** / **12** / **2013**

**Transaction ID : SA11C.4195**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. INTL UNION OF BRICKLAYERS & ALLIED CRAFTWORKERS PAC**

Mailing Address 620 F STREET, NW  
SUITE 900

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00003632

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**11** / **01** / **2013**

**Transaction ID : SA11C.4296**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. NINETY NINE PERCENT; THE**

Mailing Address PO BOX 27892

City State Zip Code  
WASHINGTON DC 20038

FEC ID number of contributing  
federal political committee.

**C** C00543140

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

**08** / **27** / **2013**

**Transaction ID : SA11C.4169**

Amount of Each Receipt this Period

25000.00

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

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

35000.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

## **A. SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE**

Mailing Address 1750 NEW YORK AVENUE, NW

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00007542

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

**09 / 04 / 2013**

**Transaction ID : SA11C.4179**

Amount of Each Receipt this Period

25000.00

Full Name (Last, First, Middle Initial)

## **B. SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE**

Mailing Address 1750 NEW YORK AVENUE, NW

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00007542

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40000.00

Date of Receipt

**10 / 29 / 2013**

**Transaction ID : SA11C.4287**

Amount of Each Receipt this Period

15000.00

Full Name (Last, First, Middle Initial)

## **C. UNITED FOOD AND COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

Mailing Address 1775 K STREET N.W.

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00002766

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

**10 / 30 / 2013**

**Transaction ID : SA11C.4289**

Amount of Each Receipt this Period

50000.00

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

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

90000.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

## **A. WORKING FOR WORKING AMERICANS - FEDERAL**

Mailing Address 6801 PLACID STREET

City State Zip Code  
 LAS VEGAS NV 89119

FEC ID number of contributing  
federal political committee.

**C** C00490847

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

**10** / **28** / **2013**

**Transaction ID : SA11C.4284**

Amount of Each Receipt this Period

25000.00

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

25000.00

374998.00

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

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

## **A. American Working Families Action Fund**

Mailing Address 107 South West Street

City State Zip Code  
Washington DC 22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

**Transaction ID : SA17.4193**

Amount of Each Receipt this Period

1000.00

Data Purchase

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

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

1000.00

1000.00

<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

## AMERICAN WORKING FAMILIES

### A. Bank of America

09 / 11 / 2013

Category/  
Type

35.00

State:  District:

### B. Bank of America

MM / DD / YYYY

Category/  
Type

State:  District:

Age Group	Percentage
18-24	18.00
25-34	15.00
35-44	12.00
45-54	10.00
55-64	8.00
65-74	6.00
75-84	4.00
85+	2.00

### C. Bank of America

Category/  
Type

State:  District:



75.00

<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

## AMERICAN WORKING FAMILIES

### A. Bank of America

Category/  
Type

Age Group	Percentage
18-24	18.00
25-34	15.00
35-44	12.00
45-54	10.00
55-64	8.00
65-74	6.00
75-84	4.00
85+	2.00

State:  District:

### B. Bank of America

09 / 16 / 2013

Category/  
Type

12.00

State:  District:

### C. Bank of America

Category/  
Type

20.00

State:  District:

Age Group	Percentage
18-24	~10%
25-34	52.00%
35-44	~15%
45-54	~10%
55-64	~10%
65-74	~10%
75-84	~10%
85+	~10%

<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

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

### A. Bank of America

Category/  
Type

19.99

State:  District:

### B. Bank of America

Category/  
Type

State:  District:

### C. Bank of America

Three 7-segment displays are shown, each with a different number of segments lit. The first display shows '10', the second shows '08', and the third shows '2013'. The displays are separated by slashes.

Category/  
Type

State:  District:

54.99

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 08 / 2013
**Transaction ID : SB21B.4237**

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 09 / 2013
**Transaction ID : SB21B.4238**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 10 / 2013
**Transaction ID : SB21B.4150**

Amount of Each Disbursement this Period

35.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

67.00





**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10      21      2013
**Transaction ID : SB21B.4242**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10      21      2013
**Transaction ID : SB21B.4243**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10      21      2013
**Transaction ID : SB21B.4308**

Amount of Each Disbursement this Period

12.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.00

<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

## AMERICAN WORKING FAMILIES

### A. Bank of America

Category/  
Type

Age Group	Percentage
18-24	18.00
25-34	15.00
35-44	12.00
45-54	10.00
55-64	8.00
65-74	6.00
75-84	4.00
85+	2.00

State:  District:

### B. Bank of America

Category/  
Type

State:  District:

### C. Bank of America

Category/  
Type

12.00

State:  District:

52.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2013
**Transaction ID : SB21B.4247**

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 29 / 2013
**Transaction ID : SB21B.4248**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 29 / 2013
**Transaction ID : SB21B.4249**

Amount of Each Disbursement this Period

12.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

44.00

<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

## AMERICAN WORKING FAMILIES

### A. Bank of America

Three 7-segment displays are shown, each with a different number of segments lit. The first display shows '10' with 4 segments lit. The second display shows '30' with 5 segments lit. The third display shows '2013' with 7 segments lit. The displays are arranged horizontally and separated by slashes.

Category/  
Type

35.00

State:  District:

### B. Bank of America

Category/  
Type

State:  District:

### C. Bank of America

Category/  
Type

State:  District:



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 600 North Washington Street

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12      02      2013
**Transaction ID : SB21B.4152**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**B. PowerThru Consulting, LLC**

Mailing Address 1740 Hinesburg Rd.

City Richmond      State VT      Zip Code 05477

Purpose of Disbursement  
Web Design

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      10      2013
**Transaction ID : SB21B.4145**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Revolution Media**

Mailing Address 1343 Massachusetts Ave, SE

City Washington      State DC      Zip Code 20003

Purpose of Disbursement  
Media Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08      24      2013
**Transaction ID : SB21B.4165**

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5515.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Sandler, Reiff, Young & Lamb, PC**Mailing Address 1025 Vermont Ave., NW  
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 26 / 2013**Transaction ID : SB21B.4306**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Spark, LLC**

Mailing Address 68 Deering Street, Suite 2

City Portland State ME Zip Code 04101

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 21 / 2013**Transaction ID : SB21B.4157**

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**C. Spark, LLC**

Mailing Address 68 Deering Street, Suite 2

City Portland State ME Zip Code 04101

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 24 / 2013**Transaction ID : SB21B.4167**

Amount of Each Disbursement this Period

15000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Spark, LLC**

Mailing Address 68 Deering Street, Suite 2

City Portland	State ME	Zip Code 04101
------------------	-------------	-------------------

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:	<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) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : SB21B.4235**

Amount of Each Disbursement this Period

15000.00
----------

Full Name (Last, First, Middle Initial)

**B. Spark, LLC**

Mailing Address 68 Deering Street, Suite 2

City Portland	State ME	Zip Code 04101
------------------	-------------	-------------------

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:	<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) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : SB21B.4298**

Amount of Each Disbursement this Period

10000.00
----------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

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) ▼

Category/  
Type

Date of Disbursement

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

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25000.00
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66085.99
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Bay State News Service**

Mailing Address 77 Pond Ave

City	State	Zip Code
Brookline	MA	02445

Purpose of Disbursement  
Research - Non-Federal Election

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2013

**Transaction ID : SB29.4161**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Bay State News Service**

Mailing Address 77 Pond Ave

City	State	Zip Code
Brookline	MA	02445

Purpose of Disbursement  
Research - Non-Federal Election

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) ▼	

Date of Disbursement

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

**Transaction ID : SB29.4228**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Extreme Reach**

Mailing Address 75 Second Hill Avenue

City	State	Zip Code
Brookline	MA	02445

Purpose of Disbursement  
TV Spot Delivery - Non-Federal Election

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) ▼	

Date of Disbursement

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

**Transaction ID : SB29.4301**

Amount of Each Disbursement this Period

5000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15000.00
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	21b		22		23		24		25		26
	27		28a		28b		28c		X		30b

## AMERICAN WORKING FAMILIES

### A. Factotum Productions

Transaction ID : SB29.4226

Category/  
Type

Disbursement For:

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

State:  District:

MM / DD / YYYY

### B. Fortune Media

Transaction ID : SB29.4175

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

### C. Fortune Media

Transaction ID : SB29.4185

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

244000.00

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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

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

**Transaction ID : SB29.4190**

Amount of Each Disbursement this Period

51000.00
----------

Full Name (Last, First, Middle Initial)

**B. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

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

**Transaction ID : SB29.4207**

Amount of Each Disbursement this Period

10000.00
----------

Full Name (Last, First, Middle Initial)

**C. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

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

**Transaction ID : SB29.4208**

Amount of Each Disbursement this Period

5000.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

66000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

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

**Transaction ID : SB29.4209**

Amount of Each Disbursement this Period

20000.00
----------

Full Name (Last, First, Middle Initial)

**B. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

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

**Transaction ID : SB29.4210**

Amount of Each Disbursement this Period

22000.00
----------

Full Name (Last, First, Middle Initial)

**C. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

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

**Transaction ID : SB29.4211**

Amount of Each Disbursement this Period

14000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2013

**Transaction ID : SB29.4223**

Amount of Each Disbursement this Period

15000.00
----------

Full Name (Last, First, Middle Initial)

**B. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

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

**Transaction ID : SB29.4255**

Amount of Each Disbursement this Period

80000.00
----------

Full Name (Last, First, Middle Initial)

**C. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

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

**Transaction ID : SB29.4257**

Amount of Each Disbursement this Period

30000.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

125000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 46

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

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

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

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

**Transaction ID : SB29.4260**

Amount of Each Disbursement this Period

108000.00
-----------

Full Name (Last, First, Middle Initial)

**B. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

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

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

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

**Transaction ID : SB29.4274**

Amount of Each Disbursement this Period

15000.00
----------

Full Name (Last, First, Middle Initial)

**C. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

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

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

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

**Transaction ID : SB29.4275**

Amount of Each Disbursement this Period

210000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

333000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 46

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2013

**Transaction ID : SB29.4276**

Amount of Each Disbursement this Period

20000.00
----------

Full Name (Last, First, Middle Initial)

**B. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2013

**Transaction ID : SB29.4277**

Amount of Each Disbursement this Period

40000.00
----------

Full Name (Last, First, Middle Initial)

**C. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

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

**Transaction ID : SB29.4288**

Amount of Each Disbursement this Period

85000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 46

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

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

**Transaction ID : SB29.4292**

Amount of Each Disbursement this Period

40000.00
----------

Full Name (Last, First, Middle Initial)

**B. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2013

**Transaction ID : SB29.4293**

Amount of Each Disbursement this Period

10000.00
----------

Full Name (Last, First, Middle Initial)

**C. Fortune Media**

Mailing Address 527 Avenue B

City	State	Zip Code
Redondo Beach	CA	90277

Purpose of Disbursement  
Advertising - Non-Federal Election

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2013

**Transaction ID : SB29.4294**

Amount of Each Disbursement this Period

5000.00
---------

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

55000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 42 OF 46

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Jackson Group Media, LLC**

Date of Disbursement

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

Mailing Address 206 North Washington Street  
Suite 10

City Alexandria State VA Zip Code 22311

Purpose of Disbursement  
Video Production - Non-Federal Election

Candidate Name

Category/  
Type**Transaction ID : SB29.4191**

Amount of Each Disbursement this Period

25000.00
----------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Jackson Group Media, LLC**

Date of Disbursement

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

Mailing Address 206 North Washington Street  
Suite 10

City Alexandria State VA Zip Code 22311

Purpose of Disbursement  
Video Production - Non-Federal Election

Candidate Name

Category/  
Type**Transaction ID : SB29.4212**

Amount of Each Disbursement this Period

7500.00
---------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Jackson Group Media, LLC**

Date of Disbursement

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

Mailing Address 206 North Washington Street  
Suite 10

City Alexandria State VA Zip Code 22311

Purpose of Disbursement  
Video Production - Non-Federal Election

Candidate Name

Category/  
Type**Transaction ID : SB29.4232**

Amount of Each Disbursement this Period

7500.00
---------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 46

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Jackson Group Media, LLC**Mailing Address 206 North Washington Street  
Suite 10

City Alexandria State VA Zip Code 22311

Purpose of Disbursement  
Video Production - Non-Federal Election

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB29.4269**

Amount of Each Disbursement this Period

40000.00
----------

Full Name (Last, First, Middle Initial)

**B. Jackson Group Media, LLC**Mailing Address 206 North Washington Street  
Suite 10

City Alexandria State VA Zip Code 22311

Purpose of Disbursement  
Video Production - Non-Federal Election

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB29.4283**

Amount of Each Disbursement this Period

7500.00
---------

Full Name (Last, First, Middle Initial)

**C. Lake Research**Mailing Address 1726 M Street, NW  
Suite 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Travel - Non-Federal Election

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB29.4304**

Amount of Each Disbursement this Period

1078.39
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48578.39
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 46

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Moody Street Pictures**Mailing Address 282 Moody Street  
3rd Floor

City Waltham State MA Zip Code 02453

Purpose of Disbursement  
Video Production - Non-Federal Election

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2013

**Transaction ID : SB29.4159**

Amount of Each Disbursement this Period

10200.00
----------

Full Name (Last, First, Middle Initial)

**B. Moody Street Pictures**Mailing Address 282 Moody Street  
3rd Floor

City Waltham State MA Zip Code 02453

Purpose of Disbursement  
Video Production - Non-Federal Election

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2013

**Transaction ID : SB29.4222**

Amount of Each Disbursement this Period

2200.00
---------

Full Name (Last, First, Middle Initial)

**C. Moody Street Pictures**Mailing Address 282 Moody Street  
3rd Floor

City Waltham State MA Zip Code 02453

Purpose of Disbursement  
Video Production - Non-Federal Election

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB29.4263**

Amount of Each Disbursement this Period

3000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15400.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 45 OF 46

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

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NAME OF COMMITTEE (In Full)

**AMERICAN WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Precision Networks**

Mailing Address 1140 Connecticut Ave, NW

City  
WashingtonState  
DCZip Code  
20036Purpose of Disbursement  
Advertising - Non-Federal Election

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2013

**Transaction ID : SB29.4261**

Amount of Each Disbursement this Period

20000.00
----------

Full Name (Last, First, Middle Initial)

**B. Public Policy Polling**

Mailing Address 2912 Highwoods Blvd

City  
RaleighState  
NCZip Code  
27604Purpose of Disbursement  
Polling - Non-Federal Election

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2013

**Transaction ID : SB29.4299**

Amount of Each Disbursement this Period

3000.00
---------

Full Name (Last, First, Middle Initial)

**C. Public Policy Polling**

Mailing Address 2912 Highwoods Blvd

City  
RaleighState  
NCZip Code  
27604Purpose of Disbursement  
Polling - Non-Federal Election

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2013

**Transaction ID : SB29.4303**

Amount of Each Disbursement this Period

2000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25000.00
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1167978.39
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**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 46 OF 46

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4113

**AMERICAN WORKING FAMILIES****LOAN SOURCE** Full Name (Last, First, Middle Initial)

Jackson Group Media, LLC

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 206 North Washington Street  
Suite 10

City Alexandria State VA ZIP Code 22311

Original Amount of Loan

3000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000.00

**TERMS**

Date Incurred

M M M / D D D / Y Y Y Y Y Y  
06 / 01 / 2012

Date Due

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

None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3000.00

**TOTALS** This Period (last page in this line only)..... ►

3000.00

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