

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
Arlington VA 22206
 Check if different than previously reported. (ACC)

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 (12S)
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 06 01 2010 through 06 30 2010

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

Type or Print Name of Treasurer Dorie Velezis

Signature of Treasurer Electronically Filed by Dorie Velezis Date 07 20 2010

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

Write or Type Committee Name
CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		1942798.34
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	2042395.82									
(c) Total Receipts (from Line 19)	99520.94	392437.02								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2141916.76	2335235.36								
7. Total Disbursements (from Line 31)	55471.61	248790.21								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2086445.15	2086445.15								
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)	8397.93									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	51003.00	205366.24
(ii) Unitemized	29691.13	122515.51
(iii) TOTAL (add Lines 11(a)(i) and (ii)	80694.13	327881.75
(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)	80694.13	327881.75
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)	176.28	211.28
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	9775.53	11093.99
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	8875.00	53250.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	8875.00	53250.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	99520.94	392437.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	90645.94	339187.02

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	8875.00	53000.00
(ii) Non-Federal Share.....	8875.00	53000.00
(b) Other Federal Operating Expenditures.....	24672.50	109641.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	42422.50	215641.10
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	17500.00
24. Independent Expenditure (use Schedule E)	8549.11	8549.11
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	5100.00
(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	5100.00
29. Other Disbursements.....	2000.00	2000.00
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))..	55471.61	248790.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46596.61	195790.21

DETAILED SUMMARY PAGE
of Disbursements

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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	80694.13	327881.75
34. Total Contribution Refunds (from Line 28(d))	0.00	5100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	80694.13	322781.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	33547.50	162641.10
37. Offsets to Operating Expenditures (from Line 15, page 3)	176.28	211.28
38. Net Operating Expenditures (subtract Line 37 from Line 36)	33371.22	162429.82

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 / 159
	<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	

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 M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 28 / 2010
	City	State	Zip Code
	HOUSTON	TX	77002
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.43488
Name of Employer ANDREWS KURTH LLP		Occupation ATTORNEY	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	<input type="text"/> 100.00

B.	Full Name (Last, First, Middle Initial) MR GARY & LINDA ALLEN		Date of Receipt
	Mailing Address 5744 E FALL CREEK PARKWAY NORTH DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 30 / 2010
	City	State	Zip Code
	INDIANAPOLIS	IN	46226
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.43190
Name of Employer N/A		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text"/> 500.00

C.	Full Name (Last, First, Middle Initial) MRS LISA B ANDERSON		Date of Receipt
	Mailing Address 3455 CHRYSLER DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 29 / 2010
	City	State	Zip Code
	JACKSONVILLE	FL	32257
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.43042
Name of Employer N/A		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 100.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 700.00
TOTAL This Period (last page this line number only)	<input type="text"/>

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43488**

0101360-0000635

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43190**

0098524-0000347

C. Form/Schedule : **SA11AI**

0003538-0000204

Transaction ID : **SA11AI.43042**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 9 / 159
	<input checked="" 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 ANDREWS	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 3869 W GULF DR	Transaction ID: SA11AI.43073
	City State Zip Code SANIBEL FL 33957	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) DAVID ASBURY	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 950 E PACES FERRY RD NE	Transaction ID: SA11AI.43017
	City State Zip Code ATLANTA GA 30326	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer NORTHWESTERN BENEFIT CORP.	Occupation OWNER	
Receipt For: 2010 <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 CHARLES D AYRES	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 4911 CASA ORO DR	Transaction ID: SA11AI.43712
	City State Zip Code YORBA LINDA CA 92886	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	1200.00
TOTAL This Period (last page this line number only)	▶	

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43073**

0107243-0000236

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43017**

0107820-0000179

C. Form/Schedule : **SA11AI**

0103804-0000849

Transaction ID : **SA11AI.43712**

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

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

FOR LINE NUMBER: PAGE 12 / 159
(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 JUDITH BIRDSEYE
 Mailing Address 15816 197TH PL NE
 City State Zip Code
 WOODINVILLE WA 98077
 Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 15 / 2010
Transaction ID: SA11AI.43782
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFO REQUESTED- NOT RECD INFO REQUESTED- NOT RECD
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

B. Full Name (Last, First, Middle Initial)
DR GARY R BISHOP
 Mailing Address 15144 LARRY ST
 City State Zip Code
 POWAY CA 92064
 Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 07 / 2010
Transaction ID: SA11AI.43661
 Amount of Each Receipt this Period
 35.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RIVERSIDE COUNTY PHARMACIST
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

C. Full Name (Last, First, Middle Initial)
MR KENNETH N BLACKBURN
 Mailing Address 10 SHALLOWBROOK DR
 City State Zip Code
 O FALLON IL 62269
 Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 21 / 2010
Transaction ID: SA11AI.43362
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AIRTRAN AIRWAYS PILOT
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

SUBTOTAL of Receipts This Page (optional) ► **185.00**
TOTAL This Period (last page this line number only) ►

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43782**

0107438-0000920

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43661**

0009108-0000798

C. Form/Schedule : **SA11AI**

0014063-0000512

Transaction ID : **SA11AI.43362**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 159
(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 ANGELYN BLANCHARD

Mailing Address 3025 HARTLEY DRIVE

City State Zip Code
SANTA ROSA CA 95405

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

Name of Employer SELF Occupation TEACHER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 28 / 2010

Transaction ID: SA11AI.43742

Amount of Each Receipt this Period
88.00

B.

Full Name (Last, First, Middle Initial)
MS ANGELYN BLANCHARD

Mailing Address 3025 HARTLEY DRIVE

City State Zip Code
SANTA ROSA CA 95405

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

Name of Employer SELF Occupation TEACHER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 408.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 29 / 2010

Transaction ID: SA11AI.43743

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
MRS MARTH J BOOTH

Mailing Address PO BOX 231

City State Zip Code
AVA MO 65608

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

Name of Employer OATS PUBLIC TRANSPORTATION Occupation DRIVER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 18 / 2010

Transaction ID: SA11AI.43382

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **788.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43742**

0103906-0000880

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43743**

0103906-0000881

C. Form/Schedule : **SA11AI**

0006997-0000532

Transaction ID : **SA11AI.43382**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 159
	(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 WILLIAM P BORDUIN		Date of Receipt MM / DD / YYYY 06 / 30 / 2010	
	Mailing Address 200 BLACK SKIMMER CT		Transaction ID: SA11AI.42888	
	City	State	Zip Code	Amount of Each Receipt this Period
	EDGEWATER	MD	21037	2500.00
	FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00		

B.	Full Name (Last, First, Middle Initial) MR TERRY O BRISTOL		Date of Receipt MM / DD / YYYY 06 / 07 / 2010	
	Mailing Address 344 E FOOTHILLS PKWY RED ROOM 9-W		Transaction ID: SA11AI.43559	
	City	State	Zip Code	Amount of Each Receipt this Period
	FORT COLLINS	CO	80525	50.00
	FEC ID number of contributing federal political committee. C			
Name of Employer 344E FOOTHILLS PARKWAY FC COLORADO		Occupation ASSET MGR		
Receipt For: 2010 <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 DEL C BROOKS		Date of Receipt MM / DD / YYYY 06 / 01 / 2010	
	Mailing Address 12789 MUIRFIELD BOULEVARD N		Transaction ID: SA11AI.43041	
	City	State	Zip Code	Amount of Each Receipt this Period
	JACKSONVILLE	FL	32225	50.00
	FEC ID number of contributing federal political committee. C			
Name of Employer SMURFIT STORE CONT. CORP		Occupation GEN MGR		
Receipt For: 2010 <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)	▶	2600.00
TOTAL This Period (last page this line number only)	▶	

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.42888**

0100966-000063

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43559**

0024811-0000704

C. Form/Schedule : **SA11AI**

0012784-0000203

Transaction ID : **SA11AI.43041**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 159
(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 STREET

City State Zip Code
ARLINGTON VA 22201

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

Name of Employer BE SERVICES Occupation ACCOUNTANT

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
MM / DD / YYYY
06 / 17 / 2010

Transaction ID: SA11AI.42902

Amount of Each Receipt this Period
100.00

B.

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

Mailing Address 300 N FILLMORE STREET

City State Zip Code
ARLINGTON VA 22201

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

Name of Employer BE SERVICES Occupation ACCOUNTANT

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2010

Transaction ID: SA11AI.42903

Amount of Each Receipt this Period
50.00

C.

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

Mailing Address 2084 BROOK HIGHLAND RDG

City State Zip Code
BIRMINGHAM AL 35242

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

Name of Employer UNIVERSITY OF ALABAMA Occupation ORAL & MAXILLOFACIAL SURGEON

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
06 / 21 / 2010

Transaction ID: SA11AI.43090

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) ▶

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.42902**

0107255-0000077

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.42903**

0107255-0000078

C. Form/Schedule : **SA11AI**

0101854-0000252

Transaction ID : **SA11AI.43090**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 159
(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 EARLE CANTY

Mailing Address 5467 SAUNDERS AVE

City State Zip Code
LOOMIS CA 95650

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

Name of Employer Occupation
NOVOSTENT CORPORATION VICE PRESIDENT

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.43748

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
RUSSELL A CARDENAS

Mailing Address 510 E SUNSHINE DR

City State Zip Code
SAN ANTONIO TX 78228

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

Name of Employer Occupation
ALCOA COST ANALYST

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 15 / 2010

Transaction ID: SA11AI.43514

Amount of Each Receipt this Period

50.00

C.

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

Mailing Address 1023 NE 98TH ST

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: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 07 / 2010

Transaction ID: SA11AI.43784

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) ▶

300.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43748**

0103911-0000887

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43514**

0103281-0000660

C. Form/Schedule : **SA11AI**

0032286-0000923

Transaction ID : **SA11AI.43784**

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

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

FOR LINE NUMBER: PAGE 27 / 159
(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 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 TWSCO INC Occupation CHAIRMAN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 06 / 18 / 2010
Transaction ID: SA11AI.43495
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
MRS DEBRA M COFFEY

Mailing Address 362 WILSON RD

City BRANSON State MO Zip Code 65616

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 22 / 2010
Transaction ID: SA11AI.43383
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
MS SHARON COMBS

Mailing Address 208 S OAK AVE

City BROKEN ARROW State OK Zip Code 74012

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

Name of Employer SHARON COMBS INTERIORS-INC. Occupation SMALL BUSINESS OWNER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 06 / 30 / 2010
Transaction ID: SA11AI.43445
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 1150.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43495**

0104559-0000642

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43383**

0007001-0000534

C. Form/Schedule : **SA11AI**

0104779-0000594

Transaction ID : **SA11AI.43445**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 159
	(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 DEBORAH R COWDEN		Date of Receipt
	Mailing Address 3437 COUNTY ROAD 959		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 18 / 2010
	City	State	Zip Code
	LOUDONVILLE	OH	44842
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.43165
Name of Employer SELF		Occupation PHYSICIAN	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 150.00
		<input type="text"/> 600.00	

B.	Full Name (Last, First, Middle Initial) MRS DOREEN J DEBLIEK		Date of Receipt
	Mailing Address 5523 WOODVIEW PASS		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 28 / 2010
	City	State	Zip Code
	MIDLAND	MI	48642
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.43216
Name of Employer N/A		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2010 <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	

C.	Full Name (Last, First, Middle Initial) MR LEONARD A DEO		Date of Receipt
	Mailing Address 2 SYLDEO DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 07 / 2010
	City	State	Zip Code
	PARSIPPANY	NJ	07054
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.42845
Name of Employer FLOWERS & GIFTS- INC.		Occupation FLORIST	Amount of Each Receipt this Period
Receipt For: 2010 <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"/> 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"/>

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43165**

0107701-0000325

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43216**

0072207-0000372

C. Form/Schedule : **SA11AI**

0001536-0000022

Transaction ID : **SA11AI.42845**

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

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

FOR LINE NUMBER: PAGE 33 / 159
(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)
FRANKLIN DEREMER

Mailing Address 8 S CIRCLE DR

City State Zip Code
SANTA CRUZ CA 95060

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2010

Transaction ID: SA11AI.43734

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS CHERI DILLON

Mailing Address 3816 MAPLEWOOD LN

City State Zip Code
PLACERVILLE CA 95667

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2010

Transaction ID: SA11AI.43751

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
MRS CHERI DILLON

Mailing Address 3816 MAPLEWOOD LN

City State Zip Code
PLACERVILLE CA 95667

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.43752

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **350.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43734**

0101353-0000872

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43751**

0060273-0000890

C. Form/Schedule : **SA11AI**

0060273-0000891

Transaction ID : **SA11AI.43752**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 159
(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 KATHLEEN A ECHELBARGER

Mailing Address 620 SUNSET AVE N

City EDMONDS State WA Zip Code 98020

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

Name of Employer SELF Occupation DEVELOPER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: MM / DD / YYYY
06 / 03 / 2010

Transaction ID: SA11AI.43783

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
MR ROBERT EDMUNDS

Mailing Address 5417 NW 67TH ST

City GAINESVILLE State FL Zip Code 32653

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

Name of Employer JONES EDMUNDS & ASSOCIATE-S- INC. Occupation ENGINEER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
06 / 29 / 2010

Transaction ID: SA11AI.43052

Amount of Each Receipt this Period 500.00

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

Mailing Address 27001 HIGHWAY 128

City YORKVILLE State CA Zip Code 95494

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

Name of Employer JAYMES & JAYMES Occupation INSURANCE BROKER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.43744

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) ►

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43783**

0108004-0000921

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43052**

0104231-0000212

C. Form/Schedule : **SA11AI**

0101847-0000883

Transaction ID : **SA11AI.43744**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 159
(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 S 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
RETIRED ENGINEER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2010

Transaction ID: SA11AI.43471

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS DEBORAH EVERLEY

Mailing Address 1008 CENTENNIAL DR

City State Zip Code
CHATTANOOGA TN 37405

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

Name of Employer Occupation
BLUE CROSS & BLUE SHIELD OF TN MANAGEMENT/ HOMEMAKER (WIFE)

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
06 / 21 / 2010

Transaction ID: SA11AI.43121

Amount of Each Receipt this Period
240.00

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

Mailing Address 201 LA COSTA CT

City State Zip Code
COSTA MESA CA 92627

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

Name of Employer Occupation
SELF PROPERTY MANAGER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2010

Transaction ID: SA11AI.43677

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **840.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43471**

0014348-0000621

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43121**

0098314-0000280

C. Form/Schedule : **SA11AI**

0107424-0000813

Transaction ID : **SA11AI.43677**

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

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

FOR LINE NUMBER: PAGE 42 / 159
(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)
ZENA FUHRMANN

Mailing Address 6226 155TH AVE CRT E

City State Zip Code
SUMNER WA 98390

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

Name of Employer Occupation
FHS RN

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.43798

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
MR ROBERT W GARTHWAIT, SR

Mailing Address PO BOX 1367

City State Zip Code
WATERBURY CT 06721

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

Name of Employer Occupation
CLY-DEL MEQ CO CHAIRMAN OF THE BOARD

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 21 / 2010

Transaction ID: SA11AI.42837

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
MR GREGORY S GEIGER

Mailing Address 122 TOOWEKA CIR

City State Zip Code
LOUDON TN 37774

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

Name of Employer Occupation
RETIRED FROM MONSANTO RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.43126

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43798**

0108089-0000933

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.42837**

0025360-0000015

C. Form/Schedule : **SA11AI**

0107711-0000287

Transaction ID : **SA11AI.43126**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 159
(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 EARL GJELDE

Mailing Address 790 ROSE ACRES CT

City Loveland State CO Zip Code 80537

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

Name of Employer SPGI Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 06 / 30 / 2010
Transaction ID: SA11AI.43561
 Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
MR JERRY GOULDING

Mailing Address PO BOX 8173

City Truckee State CA Zip Code 96162

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

Name of Employer NONE Occupation RETIRED BUILDING CONTRACTOR

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 15 / 2010
Transaction ID: SA11AI.43753
 Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
CARL E GREEN

Mailing Address 541 PINEHAVEN DR

City Houston State TX Zip Code 77024

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

Name of Employer C.E. GREEN & CO Occupation OWNER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 30 / 2010
Transaction ID: SA11AI.43490
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 850.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43561**

0106982-0000706

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43753**

0103452-0000893

C. Form/Schedule : **SA11AI**

0104949-0000637

Transaction ID : **SA11AI.43490**

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

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

FOR LINE NUMBER: PAGE 48 / 159
(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 CARL W GUSTKE

Mailing Address 233 STATON RD

City State Zip Code
CABOT AR 72023

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: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2300.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 07 / 2010

Transaction ID: SA11AI.43421

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS EILEEN P HAMEL

Mailing Address 645 WILLOW VALLEY SQ # J312

City State Zip Code
LANCASTER PA 17602

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 11 / 2010

Transaction ID: SA11AI.42870

Amount of Each Receipt this Period
375.00

C. Full Name (Last, First, Middle Initial)
MRS ARLENE M HANSEN

Mailing Address 145 DRIFTWOOD DR

City State Zip Code
AURORA NE 68818

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2010

Transaction ID: SA11AI.43411

Amount of Each Receipt this Period
200.00

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

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43421**

0022519-0000574

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.42870**

0002195-0000044

C. Form/Schedule : **SA11AI**

0067626-0000562

Transaction ID : **SA11AI.43411**

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

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

FOR LINE NUMBER: PAGE 51 / 159
(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)
MOYLE E HARWARD

Mailing Address 277 NE CONIFER BLVD UNIT 136

City State Zip Code
CORVALLIS OR 97330

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.43768

Amount of Each Receipt this Period
100.00

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

Mailing Address 7145 NW 125TH STREET 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 FARM OWNER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.43053

Amount of Each Receipt this Period
100.00

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

Mailing Address 2200 CENTRE PARK WEST DR STE 100

City State Zip Code
WEST PALM BEACH FL 33409

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

Name of Employer Occupation
HEDRICK BROTHERS GENERAL CONTRACTOR

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.43060

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43768**

0105078-0000906

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43053**

0103677-0000214

C. Form/Schedule : **SA11AI**

0047814-0000222

Transaction ID : **SA11AI.43060**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 159

(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 ROBIN HELLMUTH

Mailing Address 9511 LYNNHALL PL

City State Zip Code
ALEXANDRIA VA 22309

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

Name of Employer Occupation
SELF FULL TIME MOM

Receipt For: 2010 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.42904

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
MRS SHARON HERSCHEM

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
HERSCHEM FAMILY ENTR. CO- RP. THEME PARKS

Receipt For: 2010 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.43384

Amount of Each Receipt this Period

1000.00

C.

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 GLOBAL DISTRIBUTION

Receipt For: 2010 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1513.24

Date of Receipt

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

Transaction ID: SA11AI.43082

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.42904**

0106992-0000079

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43384**

0101332-0000535

C. Form/Schedule : **SA11AI**

0105332-0000245

Transaction ID : **SA11AI.43082**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 159
(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)
MRS DIANA E HULL

Mailing Address 3000 LEWIS RD

City RIVERTON State WY Zip Code 82501

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

Name of Employer SELF Occupation SELF EMPLOYED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 21 / 2010
Transaction ID: SA11AI.43573
 Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
MRS LORENA M 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 NONE Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt: 06 / 11 / 2010
Transaction ID: SA11AI.43066
 Amount of Each Receipt this Period: 1000.00

C.

Full Name (Last, First, Middle Initial)
MRS LORENA M 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 NONE Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt: 06 / 30 / 2010
Transaction ID: SA11AI.43067
 Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 1600.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43573**

0008315-0000720

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43066**

0103515-0000227

C. Form/Schedule : **SA11AI**

0103515-0000228

Transaction ID : **SA11AI.43067**

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

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

FOR LINE NUMBER: PAGE 60 / 159
(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, TTE
 Mailing Address 350 E HENSCHEN ST
 City State Zip Code
 GARNER IA 50438
 Date of Receipt
 M M / D D / Y Y Y Y
 06 29 2010
Transaction ID: SA11AI.43253
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

B. Full Name (Last, First, Middle Initial)
MRS PANDORA JURISOO
 Mailing Address 310 HERMAN TER
 City State Zip Code
 HOPKINS MN 55343
 Date of Receipt
 M M / D D / Y Y Y Y
 06 30 2010
Transaction ID: SA11AI.43292
 Amount of Each Receipt this Period
 75.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation HOMEMAKER
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

C. Full Name (Last, First, Middle Initial)
DR JOHN D KEISLING
 Mailing Address 35 ERICA LN
 City State Zip Code
 BELEN NM 87002
 Date of Receipt
 M M / D D / Y Y Y Y
 06 15 2010
Transaction ID: SA11AI.43617
 Amount of Each Receipt this Period
 40.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SAIC Occupation SCIENTIST
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

SUBTOTAL of Receipts This Page (optional) ► 215.00
TOTAL This Period (last page this line number only) ►

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43253**

0103497-0000405

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43292**

0106943-0000446

C. Form/Schedule : **SA11AI**

0100128-0000757

Transaction ID : **SA11AI.43617**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 159
(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: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 06 / 21 / 2010

Transaction ID: SA11AI.43618

Amount of Each Receipt this Period 50.00

B.

Full Name (Last, First, Middle Initial)
MR ROBERT P KENNETT

Mailing Address 9038 BUBBLING WELLS RD

City LAKESIDE State CA Zip Code 92040

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

Name of Employer SELF Occupation SELF-EMPLOYED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2010

Transaction ID: SA11AI.43660

Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
KRISTI KEPLEY

Mailing Address 111 BENSON BLVD

City MADISON State AL Zip Code 35758

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

Name of Employer HOME Occupation RN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2010

Transaction ID: SA11AI.43093

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) ▶

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43618**

0100128-0000758

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43660**

0102875-0000797

C. Form/Schedule : **SA11AI**

0107048-0000255

Transaction ID : **SA11AI.43093**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one) <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 66 / 159
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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 06 / 11 / 2010
	Mailing Address 1711 TOURS CT	Transaction ID: SA11AI.43719
	City State Zip Code BAKERSFIELD CA 93311	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

B.	Full Name (Last, First, Middle Initial) MRS CAROLYN C KINDER	Date of Receipt MM / DD / YYYY 06 / 08 / 2010
	Mailing Address 4212 KEEPSAKE CT	Transaction ID: SA11AI.43741
	City State Zip Code MODESTO CA 95356	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation DIALYSIS CENTER RENAL DICTITIAN	
Receipt For: 2010 <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 ROBERT M KISER	Date of Receipt MM / DD / YYYY 06 / 18 / 2010
	Mailing Address 9106 BEDFORD DR	Transaction ID: SA11AI.43541
	City State Zip Code ODESSA TX 79764	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED ELEC ENGX	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	▶	260.00
TOTAL This Period (last page this line number only)	▶	

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43719**

0103362-0000856

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43741**

0013787-0000879

C. Form/Schedule : **SA11AI**

0021000-0000688

Transaction ID : **SA11AI.43541**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 69 / 159
	(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 BETTY L KORCEK		Date of Receipt
	Mailing Address 11816 DATE 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 06 / 30 / 2010
	City	State	Zip Code
	BRIDGMAN	MI	49106
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.43227
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	<input type="text"/> 100.00

B.	Full Name (Last, First, Middle Initial) MR JOSEPH L KRAUSE, JR		Date of Receipt
	Mailing Address PO BOX 189		<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 06 / 30 / 2010
	City	State	Zip Code
	WILLCOX	AZ	85644
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.43612
Name of Employer SELF EMPLOYED		Occupation ENGINEER	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 50.00

C.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER J LAIL		Date of Receipt
	Mailing Address 158 BERRY MANOR CIR		<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 06 / 30 / 2010
	City	State	Zip Code
	SAINT PETERS	MO	63376
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.43370
Name of Employer INFO REQUESTED- NOT RECD		Occupation INFO REQUESTED- NOT RECD	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	<input type="text"/> 70.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 220.00
TOTAL This Period (last page this line number only)	<input type="text"/>

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43227**

0106527-0000381

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43612**

0103893-0000751

C. Form/Schedule : **SA11AI**

0105294-0000520

Transaction ID : **SA11AI.43370**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 159
(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 Occupation
WESTERN OILFIELDS SUPPLY CFO
CO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 03 / 2010

Transaction ID: SA11AI.43717

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 Occupation
WESTERN OILFIELDS SUPPLY CFO
CO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2010

Transaction ID: SA11AI.43718

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
MRS SHERRILL A LARSON

Mailing Address 13510 BRAEMAR DR

City State Zip Code
ELM GROVE WI 53122

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

Name of Employer Occupation
MED COLLEGE OF NI
HOMEMAKER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 07 / 2010

Transaction ID: SA11AI.43271

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) ▶

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43717**

0009387-0000854

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43718**

0009387-0000855

C. Form/Schedule : **SA11AI**

0038115-0000424

Transaction ID : **SA11AI.43271**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 159
(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 JOAN K LAUTENSCHLEGE

Mailing Address 24621 CHARLTON DRIVE

City State Zip Code
LAGUNA HILLS CA 92653

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2010

Transaction ID: SA11AI.43685

Amount of Each Receipt this Period
300.00

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

Mailing Address 34 SILVERSTRAND PL

City State Zip Code
THE WOODLANDS TX 77381

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

Name of Employer Occupation
LIGHTHOUSE HOSPICE FAMILY PHYSICIAN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2010

Transaction ID: SA11AI.43504

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR LARRY LEWIS

Mailing Address 4717 HERITAGE DR

City State Zip Code
LYNCHBURG VA 24503

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2010

Transaction ID: SA11AI.42926

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) **500.00**

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43685**

0107445-0000822

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43504**

0020241-0000650

C. Form/Schedule : **SA11AI**

0105274-0000099

Transaction ID : **SA11AI.42926**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 159
(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 LARRY LEWIS

Mailing Address 4717 HERITAGE DR

City State Zip Code
LYNCHBURG VA 24503

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 335.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.42927

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
MR MICHAEL LIBY

Mailing Address 83 VIA SANTO TOMAS

City State Zip Code
RANCHO MIRAGE CA 92270

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

Name of Employer Occupation
TELESIS RESTAURANT GROUP- INC SELF EMPLOYED

Receipt For: 2010 Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.43666

Amount of Each Receipt this Period

50.00

C.

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 Occupation
SELF RETIRED HOTEL OWNER/OPERATOR

Receipt For: 2010 Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.43470

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

400.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.42927**

0105274-0000100

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43666**

0105923-0000803

C. Form/Schedule : **SA11AI**

0101400-0000619

Transaction ID : **SA11AI.43470**

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

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

FOR LINE NUMBER: PAGE 81 / 159
(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)
GARY W LOCKE, JR
 Mailing Address 2602 BOOGER HILL RD
 City State Zip Code
 DANIELSVILLE GA 30633
 Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2010
Transaction ID: SA11AI.43029
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 US NAVY / STATE OF GA RETIRED
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

B. Full Name (Last, First, Middle Initial)
MAJ JAMES P LUKE
 Mailing Address 4273 BRISTOL DR
 City State Zip Code
 DAYTON OH 45440
 Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2010
Transaction ID: SA11AI.43176
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 USAF INFO REQUESTED- NOT RECD
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

C. Full Name (Last, First, Middle Initial)
MRS DONNA LUNDHOLM
 Mailing Address 858 MONA LN
 City State Zip Code
 MUSKEGON MI 49441
 Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2010
Transaction ID: SA11AI.43242
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NA RETIRED
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

SUBTOTAL of Receipts This Page (optional) ► 200.00
TOTAL This Period (last page this line number only) ►

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43029**

0102864-0000191

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43176**

0101785-0000335

C. Form/Schedule : **SA11AI**

0106883-0000394

Transaction ID : **SA11AI.43242**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 159
(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)
JOCELYN MANULLANG

Mailing Address 8303 121ST AVE SE

City NEWCASTLE State WA Zip Code 98056

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

Name of Employer NOT APPLICABLE Occupation HOMEMAKER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 17 / 2010
Transaction ID: SA11AI.43780
Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
JOCELYN MANULLANG

Mailing Address 8303 121ST AVE SE

City NEWCASTLE State WA Zip Code 98056

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

Name of Employer NOT APPLICABLE Occupation HOMEMAKER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 06 / 28 / 2010
Transaction ID: SA11AI.43781
Amount of Each Receipt this Period: 200.00

C.

Full Name (Last, First, Middle Initial)
MS PATRICIA ANN MARKS

Mailing Address PO BOX 605

City BELVEDERE TIBURON State CA Zip Code 94920

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

Name of Employer SELF Occupation KITCHEN DESIGNER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 06 / 30 / 2010
Transaction ID: SA11AI.43729
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ► **5300.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43780**

0107670-0000917

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43781**

0107670-0000918

C. Form/Schedule : **SA11AI**

0103354-0000866

Transaction ID : **SA11AI.43729**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 159
(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 L MCKINLEY

Mailing Address 515 11TH AVE NE

City State Zip Code
MINOT ND 58703

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2010

Transaction ID: SA11AI.43319

Amount of Each Receipt this Period
50.00

B.

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

Mailing Address 515 11TH AVE NE

City State Zip Code
MINOT ND 58703

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.43320

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
DR JAMES E MILLER

Mailing Address 835 W 55TH ST

City State Zip Code
KANSAS CITY MO 64113

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

Name of Employer Occupation
EAST CAROLINA UNIV SCHL OF ME CARDIOTHORACIC SURGEON

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.43375

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) ►

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43319**

0101794-0000471

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43320**

0101794-0000472

C. Form/Schedule : **SA11AI**

0002971-0000525

Transaction ID : **SA11AI.43375**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 / 159
(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 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 Occupation
CONCEPT 100 REALTY REALTOR

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.43615

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
MR WILLIAM T MILLS, III

Mailing Address PO BOX 52592

City State Zip Code
LAFAYETTE LA 70505

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

Name of Employer Occupation
MPW PROPERTIES- LLC OWNER

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.43413

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
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
FUSION FINANCIAL GROUP FINANCIAL PLANNER

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.42855

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43615**

0101137-0000754

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43413**

0090913-0000565

C. Form/Schedule : **SA11AI**

0104421-0000030

Transaction ID : **SA11AI.42855**

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

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

FOR LINE NUMBER: PAGE 93 / 159

(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 NICHOLS, JR

Mailing Address 1654 LA JOLLA RANCHO ROAD

City State Zip Code
LA JOLLA CA 92037

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

Name of Employer Occupation
SELF RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.43659

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
DAVID NOEBEL

Mailing Address BOX 207

City State Zip Code
MANITOU SPRINGS CO 80829

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

Name of Employer Occupation
SUMMIT MINITRRIES PRESIDENT

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.43563

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: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.42990

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43659**

0105158-0000796

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43563**

0108083-0000709

C. Form/Schedule : **SA11AI**

0031336-0000156

Transaction ID : **SA11AI.42990**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 96 / 159

(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 LINTON PARK

Mailing Address 1630 EASTLAKE CIR

City State Zip Code
TRACY CA 95304

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

Name of Employer Occupation
NATIONAL SEMICONDUCTOR ENGINEER

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.43739

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
MRS MELINDA PARK

Mailing Address 2193 RIDGEPONTE CT

City State Zip Code
WALNUT CREEK CA 94596

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

Name of Employer Occupation
CONTRA COSTA CHRISTIAN SC-
HOOOL ADMIN ASST.

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.43728

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
MRS KATRINKA PARRY

Mailing Address 340 KNOLL CREEK CIR

City State Zip Code
CHATTANOOGA TN 37415

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

Name of Employer Occupation
MARCH ADAMS CONTROLLER

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.43123

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43739**

0100155-0000876

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43728**

0053038-0000864

C. Form/Schedule : **SA11AI**

0106674-0000283

Transaction ID : **SA11AI.43123**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 / 159

(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 PASSWATERS

Mailing Address 160 WILLOW PL S

City State Zip Code
BROOMFIELD CO 80020

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.43544

Amount of Each Receipt this Period

100.00

B.

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

Mailing Address 174 EMERALD BAY

City State Zip Code
LAGUNA BEACH CA 92651

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.43684

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
MR JAMES S PHILLIPS

Mailing Address 1476 KELSO BLVD

City State Zip Code
WINDERMERE FL 34786

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

Name of Employer Occupation
CERTI-FINE FRUIT CO CITRUS GROWER

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

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

Transaction ID: SA11AI.43081

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) ▶

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43544**

0107896-0000691

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43684**

0103953-0000820

C. Form/Schedule : **SA11AI**

0011922-0000244

Transaction ID : **SA11AI.43081**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 159
(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)
MISS KRISTIN E ROBBINS

Mailing Address 5106 RAINBOW HARBOUR CIR

City State Zip Code
COLORADO SPGS CO 80917

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

Name of Employer Occupation
EL PASO COUNTY SCHOOL DISTRICT #11 MUSIC TEACHER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.43567

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
MR JEFFERY 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
ACUMED SALES MANAGER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
765.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.42946

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS TERESA A SCHAEFER

Mailing Address 1003 WRIGHT ST

City State Zip Code
PLEASANT HILL MO 64080

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

Name of Employer Occupation
SANOFI - AVENTIS US SUPPLY CHAIN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.43374

Amount of Each Receipt this Period
300.00

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

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43567**

0020480-0000713

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.42946**

0103053-0000117

C. Form/Schedule : **SA11AI**

0006928-0000523

Transaction ID : **SA11AI.43374**

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

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

FOR LINE NUMBER: PAGE 105 / 159
(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 WILLIAM SCOTT

Mailing Address 3061 E ARM RD

City State Zip Code
ELY MN 55731

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

Name of Employer SELF EMPLOYED Occupation DENTIST

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.43303

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
RICHARD SEABERG

Mailing Address 1424 VIA ZUMAYA

City State Zip Code
PALOS VERDES ESTAT CA 90274

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2010

Transaction ID: SA11AI.43634

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR CRAIG SEIBERT

Mailing Address 708 ELLSWORTH RD

City State Zip Code
CHARLOTTE NC 28211

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

Name of Employer CAMPUS CRUSADE FOR CHRIST Occupation MINISTER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2010

Transaction ID: SA11AI.42954

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **2050.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43303**

0100307-0000456

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43634**

0108068-0000772

C. Form/Schedule : **SA11AI**

0101767-0000125

Transaction ID : **SA11AI.42954**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 159
(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 J 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: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 06 / 21 / 2010
Transaction ID: SA11AI.43508
 Amount of Each Receipt this Period: 50.00

B.

Full Name (Last, First, Middle Initial)
MR PAUL V SERENIUS

Mailing Address 321 VILLAGE SQUARE DR

City CENTERVILLE State OH Zip Code 45458

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 28 / 2010
Transaction ID: SA11AI.43178
 Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
MR GREGORY L SIMONS

Mailing Address 11205 W 140TH PL

City OVERLAND PARK State KS Zip Code 66221

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

Name of Employer INFO REQUESTED- NOT RECD Occupation PROF SERVICES

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 07 / 2010
Transaction ID: SA11AI.43394
 Amount of Each Receipt this Period: 500.00

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

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43508**

0013298-0000654

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43178**

0104852-0000337

C. Form/Schedule : **SA11AI**

0015041-0000545

Transaction ID : **SA11AI.43394**

**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 111 / 159
	<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 RANDALL SKOV

Mailing Address 115 TALL TIMBER CT

City FAYETTEVILLE State GA Zip Code 30215

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

Name of Employer US AIR FORCE Occupation WEATHER OFFICER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 07 / 2010
Transaction ID: SA11AI.43011
 Amount of Each Receipt this Period 50.00

B.

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

Mailing Address 9143 COAL BANK RD

City MARSHALLVILLE State OH Zip Code 44645

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

Name of Employer SELF EMPLOYED Occupation MANAGEMENT

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 30 / 2010
Transaction ID: SA11AI.43163
 Amount of Each Receipt this Period 3000.00

C.

Full Name (Last, First, Middle Initial)
DR WILLIAM H SMITH

Mailing Address PO BOX 203

City KAAAWA State HI Zip Code 96730

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

Name of Employer STATE OF HAWAII Occupation TEACHER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 07 / 2010
Transaction ID: SA11AI.43754
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 3100.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43011**

0014942-0000173

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43163**

0097722-0000322

C. Form/Schedule : **SA11AI**

0103927-0000894

Transaction ID : **SA11AI.43754**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 114 / 159
(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 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: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 15 / 2010
Transaction ID: SA11AI.42886
 Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
MRS TAMMY E STEINBERG

Mailing Address 101 WINDINGHAM DR NW

City HUNTSVILLE State AL Zip Code 35806

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

Name of Employer HARRO APOTHERAPY Occupation HOMEMAKER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 06 / 28 / 2010
Transaction ID: SA11AI.43095
 Amount of Each Receipt this Period: 50.00

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

Mailing Address 15 HILLWOOD RD

City MOBILE State AL Zip Code 36608

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

Name of Employer SCOTCH AND GULF LUMBER CO. LLC Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 06 / 28 / 2010
Transaction ID: SA11AI.43107
 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) ►

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.42886**

0103894-0000061

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43095**

0011951-0000257

C. Form/Schedule : **SA11AI**

0101392-0000267

Transaction ID : **SA11AI.43107**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 159
(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 W S STIMPSON

Mailing Address PO BOX 1663

City MOBILE State AL Zip Code 36633

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

Name of Employer GULF LUMBER CO Occupation CFO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 06 / 30 / 2010
Transaction ID: SA11AI.43108
 Amount of Each Receipt this Period: 250.00

B.

Full Name (Last, First, Middle Initial)
MR WILLIAM STIMPSON

Mailing Address PO BOX 413

City MOBILE State AL Zip Code 36601

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

Name of Employer GULF LUMBER COMPANY Occupation CFO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt: 06 / 30 / 2010
Transaction ID: SA11AI.43101
 Amount of Each Receipt this Period: 1000.00

C.

Full Name (Last, First, Middle Initial)
MR RICHARD SUNGAILA

Mailing Address 1827 PORT STANHOPE PL

City NEWPORT BEACH State CA Zip Code 92660

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

Name of Employer SELF EMPLOYED Occupation REAL ESTATE AND PROPERTY MANAGEMENT

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 06 / 28 / 2010
Transaction ID: SA11AI.43687
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43108**

0103259-0000269

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43101**

0100947-0000262

C. Form/Schedule : **SA11AI**

0106678-0000825

Transaction ID : **SA11AI.43687**

**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 120 / 159
	<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 RICHARD SUNGAILA		Date of Receipt
	Mailing Address 1827 PORT STANHOPE PL		<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 06 / 30 / 2010
	City	State	Zip Code
	NEWPORT BEACH	CA	92660
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.43688
Name of Employer SELF EMPLOYED		Occupation REAL ESTATE AND PROPERTY MANAGEMENT	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.00	50.00

B.	Full Name (Last, First, Middle Initial) MR MARK SWISHER		Date of Receipt
	Mailing Address 24902 N POINT PL		<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 06 / 07 / 2010
	City	State	Zip Code
	KATY	TX	77494
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.43505
Name of Employer AVIARA ENERGY CORPORATION		Occupation ENGINEER	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	50.00

C.	Full Name (Last, First, Middle Initial) MRS ANNITA TAYLOR		Date of Receipt
	Mailing Address 4306 ARP PL		<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 06 / 30 / 2010
	City	State	Zip Code
	AMARILLO	TX	79109
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.43534
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 415.00	20.00

SUBTOTAL of Receipts This Page (optional)	120.00
TOTAL This Period (last page this line number only)	

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43688**

0106678-0000826

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43505**

0048257-0000651

C. Form/Schedule : **SA11AI**

0108011-0000680

Transaction ID : **SA11AI.43534**

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

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

FOR LINE NUMBER: PAGE 123 / 159
(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)
JOHN TELLING
Mailing Address 60202 DAVIE
City CHAPEL HILL State NC Zip Code 27517
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 06 / 30 / 2010
Transaction ID: SA11AI.42824
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
PATTI TESSEN
Mailing Address 9319 COUNTY ROAD 331
City GRAHAM State TX Zip Code 76450
FEC ID number of contributing federal political committee. **C**
Name of Employer REGION 14 EDUCATION SERVICE CENTER Occupation EDUCATIONAL CONSULTANT
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 06 / 30 / 2010
Transaction ID: SA11AI.43481
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
WOODY THAMES
Mailing Address 12201 MERIT DR
City DALLAS State TX Zip Code 75251
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00
Date of Receipt 06 / 28 / 2010
Transaction ID: SA11AI.43469
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) ►

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.42824**

0108101-0000001

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43481**

0107807-0000629

C. Form/Schedule : **SA11AI**

0108026-0000617

Transaction ID : **SA11AI.43469**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 126 / 159
(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 KEITH THORNTON

Mailing Address 6131 LUTHER LN

City State Zip Code
DALLAS TX 75225

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

Name of Employer SELF Occupation DENTIST

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.43460

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
MR PAUL A TONDRE

Mailing Address 410 RUA DE MATTA ST

City State Zip Code
SAN ANTONIO TX 78232

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

Name of Employer WIFE Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.43516

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MR GEORGE E TRAGOS

Mailing Address 818 ISLAND WAY

City State Zip Code
CLEARWATER FL 33767

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2010

Transaction ID: SA11AI.43070

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **3600.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43460**

0106962-0000608

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43516**

0046592-0000662

C. Form/Schedule : **SA11AI**

0003815-0000232

Transaction ID : **SA11AI.43070**

**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 129 / 159
	<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 JOHN TRUELSON		Date of Receipt
	Mailing Address 3108 CARUTH BLVD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 30 / 2010
	City	State	Zip Code
	DALLAS	TX	75225
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.43461
Name of Employer SELF		Occupation SURGEON	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00

B.	Full Name (Last, First, Middle Initial) MR LEON WALTHALL		Date of Receipt
	Mailing Address PO BOX 17991		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 29 / 2010
	City	State	Zip Code
	SAN ANTONIO	TX	78217
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.43513
Name of Employer MORTIMER FAMILY INVESTMENTS		Occupation VICE PRESIDENT	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00

C.	Full Name (Last, First, Middle Initial) ROBERT WERT		Date of Receipt
	Mailing Address 250 S ORANGE ST STE 3		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 29 / 2010
	City	State	Zip Code
	ESCONDIDO	CA	92025
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.43656
Name of Employer LPS COMPUTER SERVICE GROUP- INC.		Occupation BUSINESS OWNER	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5300.00
TOTAL This Period (last page this line number only)	<input type="text"/>

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43461**

0102387-0000610

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43513**

0075254-0000659

C. Form/Schedule : **SA11AI**

0107847-0000792

Transaction ID : **SA11AI.43656**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 132 / 159
(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 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: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00
Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2010
Transaction ID: SA11AI.43133
Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR KEITH M WHITE
Mailing Address 15 OAK PL
City State Zip Code
NEW IBERIA LA 70563
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
QUAIL TOOLS LP VP
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00
Date of Receipt
M M / D D / Y Y Y Y
06 / 03 / 2010
Transaction ID: SA11AI.43414
Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MRS WARD A WHITEMAN
Mailing Address 4007 NORWOOD ST
City State Zip Code
MIDLAND TX 79707
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
BURLINGTON RESOURCES GEOLOGIST
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00
Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2010
Transaction ID: SA11AI.43540
Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1550.00**
TOTAL This Period (last page this line number only) ►

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43133**

0101707-0000295

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43414**

0080400-0000567

C. Form/Schedule : **SA11AI**

0059494-0000686

Transaction ID : **SA11AI.43540**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 135 / 159
(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 DEREK M WOODS

Mailing Address 2910 VILLA CT

City State Zip Code
BETTENDORF IA 52722

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

Name of Employer Occupation
CROWN CONSULTING- LLC SELF EMPLOYED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.43268

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MRS MARILYN WOY

Mailing Address 27511 HYATT CT

City State Zip Code
LAGUNA NIGUEL CA 92677

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

Name of Employer Occupation
MARINERS CHURCH ADMIN. ASSISTANT

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
06 / 21 / 2010

Transaction ID: SA11AI.43692

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MRS MARILYN WOY

Mailing Address 27511 HYATT CT

City State Zip Code
LAGUNA NIGUEL CA 92677

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

Name of Employer Occupation
MARINERS CHURCH ADMIN. ASSISTANT

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2010

Transaction ID: SA11AI.43693

Amount of Each Receipt this Period
50.00

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

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43268**

0101452-0000421

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43692**

0106759-0000830

C. Form/Schedule : **SA11AI**

0106759-0000831

Transaction ID : **SA11AI.43693**

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

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

FOR LINE NUMBER: PAGE 138 / 159
(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 A ZIMMERMAN

Mailing Address 22614 N MAIN ST

City State Zip Code
MORTON IL 61550

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

Name of Employer Occupation
CATERPILLAR RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	8	/	2	0	1	0

Transaction ID: SA11AI.43355

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MR JOHN A ZIMMERMAN

Mailing Address 22614 N MAIN ST

City State Zip Code
MORTON IL 61550

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

Name of Employer Occupation
CATERPILLAR RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	9	/	2	0	1	0

Transaction ID: SA11AI.43356

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)	▶	51003.00

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43355**

0104426-0000504

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.43356**

0104426-0000505

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

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

FOR LINE NUMBER: PAGE 140 / 159
(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 ▼
1183.50

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 1 0

Transaction ID: SA17.43869

Amount of Each Receipt this Period
237.93

INTEREST INCOME

B.

Full Name (Last, First, Middle Initial)
PINNACLE LIST CO

Mailing Address 2800 SHIRLINGTON RD #970

City State Zip Code
ARLINGTON VA 22206

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9537.60

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 9 / 2 0 1 0

Transaction ID: SA17.43870

Amount of Each Receipt this Period
9537.60

LIST RENTAL INCOME

SUBTOTAL of Receipts This Page (optional)	▶	9775.53
TOTAL This Period (last page this line number only)	▶	9775.53

**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 141 / 159

<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) DAN ALLOTT	Transaction ID: SB21B.43845 Date of Disbursement 06 / 28 / 2010
	Mailing Address 2800 S. SHIRLINGTON ROAD #930	Amount of Each Disbursement this Period 2000.00
	City ARLINGTON State VA Zip Code 22206	
	Purpose of Disbursement PAC CONSULTING POLITICAL WRITING	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) American Express	Transaction ID: SB21B.43820 Date of Disbursement 06 / 01 / 2010
	Mailing Address P.O. Box 981540	Amount of Each Disbursement this Period 4.95
	City El Paso State TX Zip Code 79998	
	Purpose of Disbursement BANK FEES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.43822 Date of Disbursement 06 / 21 / 2010
	Mailing Address P.O. Box 981540	Amount of Each Disbursement this Period 0.80
	City El Paso State TX Zip Code 79998	
	Purpose of Disbursement BANK FEES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2005.75
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)

PAGE 142 / 159

<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) 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 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.43823</p> <p>Date of Disbursement 06 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 0.96</p>
<p>B. Full Name (Last, First, Middle Initial) Authorize.net</p> <p>Mailing Address 808 East Utah Valley Drive</p> <p>City American Fork State UT Zip Code 84003</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.43819</p> <p>Date of Disbursement 06 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 38.95</p>
<p>C. 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.43821</p> <p>Date of Disbursement 06 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 446.92</p>

SUBTOTAL of Disbursements This Page (optional) ▶

486.83

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)
CHOI COMPANIES

Transaction ID: SB21B.43841
Date of Disbursement

Mailing Address 5999 STEVENSON AVE #310

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	0

City State Zip Code
ALEXANDRIA VA 22304

Amount of Each Disbursement this Period

2756.00

Purpose of Disbursement
RENT

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
COVAD COMMUNICATIONS

Transaction ID: SB21B.43830
Date of Disbursement

Mailing Address P.O. BOX 39000

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	0

City State Zip Code
SAN FRANCISCO CA 94139

Amount of Each Disbursement this Period

104.45

Purpose of Disbursement
COMPUTER SERVICES

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

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

Transaction ID: SB21B.43856
Date of Disbursement

Mailing Address 106 N. Collins Street

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	0

City State Zip Code
Plant City FL 33563

Amount of Each Disbursement this Period

1725.00

Purpose of Disbursement
PAC WEB VIDEO PRODUCTION

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

4585.45

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

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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 <hr/> Mailing Address P.O. BOX 1140 <hr/> City MEMPHIS State TN Zip Code 38101 <hr/> Purpose of Disbursement SHIPPING 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.43833 Date of Disbursement 06 / 14 / 2010 <hr/> Amount of Each Disbursement this Period 63.80
B.	Full Name (Last, First, Middle Initial) FEDERAL EXPRESS <hr/> Mailing Address P.O. BOX 1140 <hr/> City MEMPHIS State TN Zip Code 38101 <hr/> Purpose of Disbursement SHIPPING 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.43842 Date of Disbursement 06 / 25 / 2010 <hr/> Amount of Each Disbursement this Period 16.17
C.	Full Name (Last, First, Middle Initial) FEDERAL EXPRESS <hr/> Mailing Address P.O. BOX 1140 <hr/> City MEMPHIS State TN Zip Code 38101 <hr/> Purpose of Disbursement SHIPPING 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.43846 Date of Disbursement 06 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 85.03

SUBTOTAL of Disbursements This Page (optional) ▶	165.00
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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) INTEGRAM</p> <p>Mailing Address 8421 HILLTOP ROAD</p> <p>City FAIRFAX State VA Zip Code 22031</p> <p>Purpose of Disbursement PAC DIRECT MAIL PRODUCTION</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.43860</p> <p>Date of Disbursement 06 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 2553.41</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) INTEGRAM</p> <p>Mailing Address 8421 HILLTOP ROAD</p> <p>City FAIRFAX State VA Zip Code 22031</p> <p>Purpose of Disbursement PAC DIRECT MAIL PRODUCTION</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.43858</p> <p>Date of Disbursement 06 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 3657.62</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) IRON MOUNTAIN</p> <p>Mailing Address 745 ATLANTIC AVE</p> <p>City BOSTON State MA Zip Code 02111</p> <p>Purpose of Disbursement STORAGE 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.43834</p> <p>Date of Disbursement 06 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 238.95</p>

SUBTOTAL of Disbursements This Page (optional)	6449.98
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) J&J PRINTING</p> <p>Mailing Address 5540 PORT ROYAL ROAD</p> <p>City SPRINGFIELD State VA Zip Code 22151</p> <p>Purpose of Disbursement PAC GENERAL OFFICE PRINTING</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.43853</p> <p>Date of Disbursement 06 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1185.98</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) LASER AGE</p> <p>Mailing Address 7210 E GARY ROAD</p> <p>City MANASSAS State VA Zip Code 20109</p> <p>Purpose of Disbursement OFFICE SUPPLIES</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.43843</p> <p>Date of Disbursement 06 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 343.75</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) LEXIS NEXIS</p> <p>Mailing Address P.O. BOX 7247-7090</p> <p>City PHILADELPHIA State PA Zip Code 19170</p> <p>Purpose of Disbursement DUES & SUBSCRIPTIONS</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.43836</p> <p>Date of Disbursement 06 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 350.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1879.73

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) LPS	Transaction ID: SB21B.43861 Date of Disbursement
	Mailing Address P.O. BOX 2325	<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC - DATA ENTRY SERVICES	<input type="text" value="399.95"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LPS	Transaction ID: SB21B.43857 Date of Disbursement
	Mailing Address P.O. BOX 2325	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC DATA PROCESSING SERVICES	<input type="text" value="1349.74"/>
	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) PR NEWSWIRE	Transaction ID: SB21B.43837 Date of Disbursement
	Mailing Address 810 7TH AVE 32ND FL	<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City NEW YORK State NY Zip Code 10019	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC PRESS RELEASE	<input type="text" value="195.00"/>
	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="1944.69"/>
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) PR NEWSWIRE	Transaction ID: SB21B.43847 Date of Disbursement
	Mailing Address 810 7TH AVE 32ND FL	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City NEW YORK State NY Zip Code 10019	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC NEWS RELEASE	<input type="text" value="320.00"/>
	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) TOM ROSE	Transaction ID: SB21B.43864 Date of Disbursement
	Mailing Address P.O. BOX 40879	<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City INDIANAPOLIS State IN Zip Code 46260	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC CONSULTING POLITICAL RESEARCH/WRITING	<input type="text" value="2500.00"/>
	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) THE LUKENS COMPANY	Transaction ID: SB21B.43859 Date of Disbursement
	Mailing Address 2800 SHIRLINGTON ROAD #900	<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC DIRECT MAIL PRODUCTION	<input type="text" value="2000.00"/>
	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)	<input type="text" value="4820.00"/>
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)

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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) UNITED BANK	Transaction ID: SB21B.43824 Date of Disbursement
	Mailing Address 4501 DALY DRIVE	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City CHANTILLY State VA Zip Code 20151	Amount of Each Disbursement this Period
	Purpose of Disbursement BANK FEES	<input type="text" value="92.71"/>
	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) VERIZON	Transaction ID: SB21B.43844 Date of Disbursement
	Mailing Address P.O. BOX 17577	<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City BALTIMORE State MD Zip Code 21297	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEPHONE	<input type="text" value="433.36"/>
	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) DEAN VIRAG	Transaction ID: SB21B.43831 Date of Disbursement
	Mailing Address 14039 WESTWIND LANE	<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City CULPEPER State VA Zip Code 22701	Amount of Each Disbursement this Period
	Purpose of Disbursement WEBSITE SUPPORT	<input type="text" value="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) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1026.07"/>
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)
WASHINGTON INTELLIGENCE BUREAU

Transaction ID: SB21B.43854

Date of Disbursement

Mailing Address 4128 PEPSI PLACE

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	0

City State Zip Code
CHANTILLY VA 20151

Amount of Each Disbursement this Period

1249.57

Purpose of Disbursement
PAC CAGING AND DATA ENTRY SERVICES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1249.57

TOTAL This Period (last page this line number only)

24613.07

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
FRIENDS OF FRANK WOLF

Transaction ID: SB23.43828

Date of Disbursement

Mailing Address P. O. BOX 710235

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

City State Zip Code
OAK HILL VA 20171

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
CONTRIBUTION

--

Candidate Name
FRIENDS OF FRANK WOLF

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: VA District: 10

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

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

2500.00

**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 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)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
BRIAN BIRDWELL CAMPAIGN

Transaction ID: SB29.43865

Date of Disbursement

Mailing Address 1602 CATALINA BAY COURT

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	0

City State Zip Code
GRANBURY TX 76048

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
CONTRIBUTION TO STATE SENATE RACE

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

2000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ADVANCED DIGITAL SOLUTIONS			Nature of Debt (Purpose): PAC COMPUTER SUPPORT
Mailing Address 10680 MAIN STREET			
City FAIRFAX	State VA	ZIP Code 22030	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.43867	
Amount Incurred This Period 1215.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1215.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor COVINGTON & BURLING			Nature of Debt (Purpose): PAC LEGAL FEES
Mailing Address 1201 PENNSYLVANIA AVE NW			
City WASHINGTON	State DC	ZIP Code 20044	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.43868	
Amount Incurred This Period 3308.32	Payment This Period 0.00	Outstanding Balance at Close of This Period 3308.32	

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

Outstanding Balance Beginning This Period 223.11		Transaction ID: SD10.4694	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 223.11	

1) SUBTOTALS This Period This Page (optional).....	▶	4746.43
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
J&J PRINTING

Nature of Debt (Purpose):
PAC GENERAL OFFICE STATIONERY

Mailing Address 5540 PORT ROYAL ROAD

City State ZIP Code
SPRINGFIELD VA 22151

Outstanding Balance Beginning This Period

1185.98

Transaction ID: SD10.42818

Amount Incurred This Period

0.00

Payment This Period

1185.98

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MWM DIRECT MARKETING SERVICES

Nature of Debt (Purpose):
PAC - DIRECT MAIL

Mailing Address 8048 HILLRISE COURT

City State ZIP Code
ELKRIDGE MD 21075

Outstanding Balance Beginning This Period

2320.90

Transaction ID: SD10.4696

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2320.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
WASHINGTON INTELLIGENCE BUREAU

Nature of Debt (Purpose):
PAC CAGING AND DATA ENTRY SERVICES

Mailing Address 4128 PEPSI PLACE

City State ZIP Code
CHANTILLY VA 20151

Outstanding Balance Beginning This Period

1249.57

Transaction ID: SD10.42819

Amount Incurred This Period

0.00

Payment This Period

1249.57

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)	PAGE 155 / 159
	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 WASHINGTON INTELLIGENCE BUREAU			Nature of Debt (Purpose): PAC CAGING AND DATA ENTRY SERVICES
Mailing Address 4128 PEPSI PLACE			
City CHANTILLY	State VA	ZIP Code 20151	

Outstanding Balance Beginning This Period		Transaction ID: SD10.43855	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
1330.60	0.00	1330.60	

1) SUBTOTALS This Period This Page (optional).....	1330.60
2) TOTALS This Period (last page this line number only).....	8397.93
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	8397.93

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CAMPAIGN FOR WORKING FAMILIES	FEC IDENTIFICATION NUMBER C C00325076
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ccAdvertising

Date
M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 1 0

Mailing Address
13800 Coppermine Road

Amount
5799.11

City State Zip Code
Herndon VA 20171

Transaction ID: SE.42045

Purpose of Expenditure
PAC PHONE CAMPAIGN

Category/
Type 004

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
CAMPBELL FOR US SENATE

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 5799.11

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Susan B. Anthony List

Date
M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 1 0

Mailing Address
1800 N Kent Street

Amount
2750.00

City State Zip Code
Arlington VA 22209

Transaction ID: SE.42046

Purpose of Expenditure
PAC PHONE CAMPAIGN

Category/
Type 004

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
CAMPBELL FOR US SENATE

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 8549.11

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	8549.11
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	8549.11

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dorie Velezis
Signature

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

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
 CAMPAIGN FOR WORKING FAMILIES

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 CAMPAIGN FOR WORKING FAMILIES

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
CAMPAIGN FOR WORKING FAMILIES	M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 1 0	8875.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	8875.00	Transaction ID: H3.43848
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	8875.00
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	8875.00

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) GARY BAUER			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2800 SHIRLINGTON ROAD #930			Allocated Activity or Event Year-To-Date 100750.00		
City ARLINGTON	State VA	Zip Code 22206	Date <input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: PAC CONSULTING POLITICAL FUNDRAISING & ADMIN			Transaction ID: H4.43825		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6250.00		6250.00		12500.00

B. Full Name (Last, First, Middle Initial) BILL MOELLER			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2800 SHIRLINGTON ROAD #930			Allocated Activity or Event Year-To-Date 103500.00		
City ARLINGTON	State VA	Zip Code 22206	Date <input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: PAC CONSULTING POLITICAL RESEARCH/WRITER			Transaction ID: H4.43826		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1375.00		1375.00		2750.00

C. Full Name (Last, First, Middle Initial) Dorie Velezis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2800 S. Shirlington Road, #930			Allocated Activity or Event Year-To-Date 106000.00		
City Arlington	State VA	Zip Code 22206	Date <input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: PAC ACCOUNTING SERVICES			Transaction ID: H4.43827		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1250.00		1250.00		2500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8875.00		8875.00		17750.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
8875.00		8875.00		17750.00