

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

CAMPAIGN FOR WORKING FAMILIES

ADDRESS (number and street) 2800 Shirlington Road, Suite 930

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

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

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:
- | | | | |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input checked="" type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day Post -Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 04 01 2011 through 04 30 2011

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 05 20 2011

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	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		1167611.58
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	1156617.66									
(c) Total Receipts (from Line 19)	69451.50	160521.53								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1226069.16	1328133.11								
7. Total Disbursements (from Line 31)	47481.33	149545.28								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1178587.83	1178587.83								
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)	4096.58									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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)	34865.00	60965.00
(ii) Unitemized	25204.90	61934.73
(iii) TOTAL (add Lines 11(a)(i) and (ii)	60069.90	122899.73
(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)	60069.90	122899.73
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	6.60	121.80
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	9375.00	37500.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	9375.00	37500.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	69451.50	160521.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	60076.50	123021.53

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.....	9375.00	37500.00
(ii) Non-Federal Share.....	9375.00	37500.00
(b) Other Federal Operating Expenditures.....	28721.33	74410.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	47471.33	149410.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	10.00	135.00
(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))	10.00	135.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	47481.33	149545.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	38106.33	112045.28

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)	60069.90	122899.73
34. Total Contribution Refunds (from Line 28(d))	10.00	135.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	60059.90	122764.73
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	38096.33	111910.28
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	38096.33	111910.28

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 70

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MR GARY ALLEN		Date of Receipt																				
	Mailing Address 5744 E FALL CREEK PARKWAY NORTH DR		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	4		0	6		2	0	1	1													
	City	State	Zip Code																				
INDIANAPOLIS	IN	46226																					
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.50351																					
Name of Employer VANCO		Occupation OFFICE MANAGER	Amount of Each Receipt this Period																				
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<table border="1"><tr><td>500.00</td></tr></table>	500.00																			
500.00																							

B.	Full Name (Last, First, Middle Initial) MR MARK ANDREWS		Date of Receipt																				
	Mailing Address 3869 W GULF DR		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	4		0	6		2	0	1	1													
	City	State	Zip Code																				
SANIBEL	FL	33957																					
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.50254																					
Name of Employer NONE		Occupation RETIRED	Amount of Each Receipt this Period																				
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<table border="1"><tr><td>500.00</td></tr></table>	500.00																			
500.00																							

C.	Full Name (Last, First, Middle Initial) MR CHARLES D AYRES		Date of Receipt																				
	Mailing Address 4911 CASA ORO DR		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	3		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	4		1	3		2	0	1	1													
	City	State	Zip Code																				
YORBA LINDA	CA	92886																					
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.50722																					
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period																				
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<table border="1"><tr><td>100.00</td></tr></table>	100.00																			
100.00																							

SUBTOTAL of Receipts This Page (optional)	<table border="1"><tr><td>1100.00</td></tr></table>	1100.00
1100.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50351**

0098524-0000256

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50254**

0107243-0000160

C. Form/Schedule : **SA11AI**

0103804-0000624

Transaction ID : **SA11AI.50722**

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

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

FOR LINE NUMBER: PAGE 9 / 70
(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 CLIFF BENSON

Mailing Address 12921 DURANT RD

City State Zip Code
RALEIGH NC 27614

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: SA11AI.50180

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1 MAPLE ST

City State Zip Code
NEW CANAAN CT 06840

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

Name of Employer Occupation
STONY BROOK UNIVERSITY PROFESSOR

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: SA11AI.50103

Amount of Each Receipt this Period
500.00

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

Mailing Address PO BOX 5562

City State Zip Code
MIDLAND TX 79707

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

Name of Employer Occupation
PETROLEUM STRATEGIES INC BUS. MANAGER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

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

Transaction ID: SA11AI.50611

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50180**

0108887-0000088

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50103**

0108913-0000016

C. Form/Schedule : **SA11AI**

0108889-0000511

Transaction ID : **SA11AI.50611**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 70
(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 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 Occupation
UNIVERSITY OF ALABAMA MOM

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

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

Transaction ID: SA11AI.50264

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
MRS LINDSAY BUCKNER

Mailing Address 520 HENNESSY RD

City State Zip Code
YAKIMA WA 98908

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

Name of Employer Occupation
TREE TOP- INC. SR. VICE PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.50790

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
CARL C CALMA

Mailing Address 3807 MOUNT CARMEL LN

City State Zip Code
MELBOURNE FL 32901

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

Name of Employer Occupation
RAYTHEON ENGINEER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.50248

Amount of Each Receipt this Period
100.00

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

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50264**

0101854-0000171

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50790**

0107370-0000692

C. Form/Schedule : **SA11AI**

0105079-0000152

Transaction ID : **SA11AI.50248**

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

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

FOR LINE NUMBER: PAGE 15 / 70
(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 ROBERT CHAPDELAINE

Mailing Address 990 SWEET GRASS CIR

City State Zip Code
AURORA OH 44202

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

Name of Employer Occupation
NESTLE DIRECTOR

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

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

Transaction ID: SA11AI.50325

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
MR WARREN W DEKREY

Mailing Address 730 ASPEN PL

City State Zip Code
BISMARCK ND 58503

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	9	/	2	0	1	1

Transaction ID: SA11AI.50452

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
MR DON DOWNS

Mailing Address 333 W PASEO DE CRISTOBAL

City State Zip Code
SAN CLEMENTE CA 92672

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: SA11AI.50712

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **2800.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50325**

0107937-0000230

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50452**

0006258-0000353

C. Form/Schedule : **SA11AI**

0009205-0000612

Transaction ID : **SA11AI.50712**

**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 18 / 70
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MRS KATHLEEN A ECHELBARGER		Date of Receipt
	Mailing Address 620 SUNSET AVE N		<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	EDMONDS	WA	98020
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SELF		Occupation HOMEMAKER	Transaction ID: SA11AI.50773
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="500.00"/>
		<input type="text" value="500.00"/>	

B.	Full Name (Last, First, Middle Initial) MR WILLIAM S EDGERLY		Date of Receipt
	Mailing Address 32 HIGHLAND ST		<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	CAMBRIDGE	MA	02138
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer NONE		Occupation RETIRED	Transaction ID: SA11AI.50090
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="500.00"/>
		<input type="text" value="600.00"/>	

C.	Full Name (Last, First, Middle Initial) MRS DEBORAH EVERLEY		Date of Receipt
	Mailing Address 1008 CENTENNIAL DR		<input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	CHATTANOOGA	TN	37405
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BLUE CROSS & BLUE SHIELD OF TN		Occupation MANAGEMENT/ HOMEMAKER (WIFE)	Transaction ID: SA11AI.50285
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="240.00"/>
		<input type="text" value="240.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1240.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50773**

0103709-0000674

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50090**

0104008-0000003

C. Form/Schedule : **SA11AI**

0098314-0000190

Transaction ID : **SA11AI.50285**

**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 21 / 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MR FRED B FRANK		Date of Receipt	
	Mailing Address 501 VIA JUAREZ		M M / D D / Y Y Y Y 04 / 05 / 2011	
	City	State	Zip Code	Transaction ID: SA11AI.50714
	SAN CLEMENTE	CA	92673	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer COMFORT MUSIC		Occupation RECORD PRODUCER		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00		

B.	Full Name (Last, First, Middle Initial) MR CARL E GREEN		Date of Receipt	
	Mailing Address 541 PINEHAVEN DR		M M / D D / Y Y Y Y 04 / 06 / 2011	
	City	State	Zip Code	Transaction ID: SA11AI.50568
	HOUSTON	TX	77024	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer C.E. GREEN & CO.		Occupation OWNER		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) MRS ARLENE M HANSEN		Date of Receipt	
	Mailing Address 145 DRIFTWOOD DR		M M / D D / Y Y Y Y 04 / 20 / 2011	
	City	State	Zip Code	Transaction ID: SA11AI.50511
	AURORA	NE	68818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		200.00	
Name of Employer SELF		Occupation RETIRED		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional)	950.00
TOTAL This Period (last page this line number only)	

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50714**

0102190-0000615

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50568**

0104949-0000468

C. Form/Schedule : **SA11AI**

0067626-0000414

Transaction ID : **SA11AI.50511**

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

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

FOR LINE NUMBER: PAGE 24 / 70

(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 DALE HEDRICK		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 1		
	Mailing Address 2200 CENTRE PARK WEST DR STE 100		Transaction ID: SA11AI.50249		
	City WEST PALM BEACH	State FL	Zip Code 33409	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer HEDRICK BROTHERS	Occupation GENERAL CONTRACTOR			
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

B.	Full Name (Last, First, Middle Initial) MR RICHARD L HELD		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 1		
	Mailing Address 3512 W 101ST TER		Transaction ID: SA11AI.50498		
	City LEAWOOD	State KS	Zip Code 66206	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer HELD & ASSOCIATES- INC.	Occupation INT'L. FREIGHT FORWARDER			
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

C.	Full Name (Last, First, Middle Initial) MRS ROBIN HELLMUTH		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 1 1		
	Mailing Address 9511 LYNNHALL PL		Transaction ID: SA11AI.50155		
	City ALEXANDRIA	State VA	Zip Code 22309	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer SELF	Occupation FULL TIME MOM			
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50249**

0047814-0000153

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50498**

0101304-0000401

C. Form/Schedule : **SA11AI**

0108926-0000066

Transaction ID : **SA11AI.50155**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 70
(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)
TODD HICKS

Mailing Address 2828 FORK RD

City State Zip Code
GAINESVILLE GA 30506

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

Name of Employer ALLEGIANCE RETIREMENT SOLUTIONS- IN Occupation RETIREMENT COACH AND MONEY MANAGER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.50227

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JOHN HOCEVAR

Mailing Address 348 W EDINBURGH DR

City State Zip Code
HIGHLAND HTS OH 44143

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

Name of Employer SELF EMPLOYED Occupation ENTREPRENEUR

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11AI.50324

Amount of Each Receipt this Period
2500.00

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

Mailing Address 6035 S VIVIAN ST

City State Zip Code
LITTLETON CO 80127

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

Name of Employer CARIDIAN BCT Occupation REGULATORY AFFAIRS

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

Transaction ID: SA11AI.50616

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **5000.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50227**

0108871-0000133

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50324**

0108867-0000228

C. Form/Schedule : **SA11AI**

0008108-0000517

Transaction ID : **SA11AI.50616**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 70
(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 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: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 21 / 2011
Transaction ID: SA11AI.50640
Amount of Each Receipt this Period 200.00

B.

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

Mailing Address 350 E HENSCHEN ST

City GARNER State IA Zip Code 50438

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 04 / 06 / 2011
Transaction ID: SA11AI.50401
Amount of Each Receipt this Period 25.00

C.

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

Mailing Address 350 E HENSCHEN ST

City GARNER State IA Zip Code 50438

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 04 / 26 / 2011
Transaction ID: SA11AI.50402
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 325.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50640**

0008315-0000539

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50401**

0103497-0000308

C. Form/Schedule : **SA11AI**

0103497-0000309

Transaction ID : **SA11AI.50402**

**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 33 / 70
	<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 S KIRKPATRICK		Date of Receipt MM / DD / YYYY 04 / 06 / 2011
Mailing Address 13874 BELLA RIVA LN		Transaction ID: SA11AI.50242
City JACKSONVILLE	State FL	Zip Code 32225
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer UNIVERSITY OF FLORIDA	Occupation PHYSICIAN AND EDUCATOR	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) JOCELYN MANULLANG		Date of Receipt MM / DD / YYYY 04 / 05 / 2011
Mailing Address 8303 121ST AVE SE		Transaction ID: SA11AI.50776
City NEWCASTLE	State WA	Zip Code 98056
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer NONE	Occupation HOMEMAKER/HOMESCHOOLING PARENT	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

C.

Full Name (Last, First, Middle Initial) MR JAMES H MATSON		Date of Receipt MM / DD / YYYY 04 / 27 / 2011
Mailing Address 210 EXMOOR AVE		Transaction ID: SA11AI.50462
City GLEN ELLYN	State IL	Zip Code 60137
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer GRIFFIN KUBIK STEPHENS & THOMPSON	Occupation SALES MANAGEMENT	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1800.00
TOTAL This Period (last page this line number only)	

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50242**

0003883-0000146

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50776**

0107670-0000678

C. Form/Schedule : **SA11AI**

0006454-0000365

Transaction ID : **SA11AI.50462**

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 36 / 70
	<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 Q NICHOLS, JR	Date of Receipt MM / DD / YYYY 04 / 05 / 2011
	Mailing Address 1654 LA JOLLA RANCHO RD	Transaction ID: SA11AI.50690
	City State Zip Code LA JOLLA CA 92037	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: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) MR LINTON PARK	Date of Receipt MM / DD / YYYY 04 / 05 / 2011
	Mailing Address 1630 EASTLAKE CIR	Transaction ID: SA11AI.50745
	City State Zip Code TRACY CA 95304	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer NATIONAL SEMICONDUCTOR	Occupation ENGINEER	
Receipt For: 2012 <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 BRIAN R PARKER	Date of Receipt MM / DD / YYYY 04 / 22 / 2011
	Mailing Address 2514 MEADOW DR	Transaction ID: SA11AI.50390
	City State Zip Code ZEELAND MI 49464	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
Name of Employer GENTEX	Occupation ENGINEER	
Receipt For: 2012 <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)	550.00
TOTAL This Period (last page this line number only)	

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50690**

0105158-0000589

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50745**

0100155-0000646

C. Form/Schedule : **SA11AI**

0021018-0000296

Transaction ID : **SA11AI.50390**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 70
(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)
SCOTT PEOTTER

Mailing Address 1901 PORT WEYBRIDGE PL

City State Zip Code
NEWPORT BEACH CA 92660

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

Name of Employer Occupation
SELF ARCHITECT

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.50710

Amount of Each Receipt this Period
1000.00

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: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

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

Transaction ID: SA11AI.50705

Amount of Each Receipt this Period
700.00

C. Full Name (Last, First, Middle Initial)
MR GARY L PILGRIM

Mailing Address 121 MINE RD

City State Zip Code
MALVERN PA 19355

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID: SA11AI.50132

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **4200.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50710**

0108151-0000609

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50705**

0103953-0000603

C. Form/Schedule : **SA11AI**

0002326-0000043

Transaction ID : **SA11AI.50132**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 70
(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 ELSA D PRINCE

Mailing Address 1057 S SHORE DR

City State Zip Code
HOLLAND MI 49423

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

Name of Employer SELF Occupation BUSINESS- EDP MGMT

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

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

Transaction ID: SA11AI.50387

Amount of Each Receipt this Period
2500.00

B.

Full Name (Last, First, Middle Initial)
MRS ANN L QUEST

Mailing Address 5609 URSULA LN

City State Zip Code
DALLAS TX 75229

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

Name of Employer NOT EMPLOYED Occupation VOLUNTEER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11AI.50548

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
MR JAMES R REED

Mailing Address 3613 LITTLE RD

City State Zip Code
LUTZ FL 33548

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

Name of Employer LIFE CONNECTIONS COUNSELING CENTER Occupation PSYCHOLOGIST

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.50251

Amount of Each Receipt this Period
500.00

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

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50387**

0005433-0000292

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50548**

0104196-0000449

C. Form/Schedule : **SA11AI**

0104786-0000156

Transaction ID : **SA11AI.50251**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 70

(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 JEFF ROBILLARD

Mailing Address 5028 LONGVIEW CT

City State Zip Code
WEDDINGTON NC 28104

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

Name of Employer Occupation
SEATTLE SYSTEMS SALES MANAGER

Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
700.00

Date of Receipt

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

Transaction ID: SA11AI.50184

Amount of Each Receipt this Period

700.00

B.

Full Name (Last, First, Middle Initial)
MS SHAREN RUSSELL

Mailing Address 1651 WILSON AVE

City State Zip Code
CHESTERFIELD MO 63005

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

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

Transaction ID: SA11AI.50484

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)
MR GARY J SELF

Mailing Address 8508 YORKSHIRE DR

City State Zip Code
ORANGE TX 77632

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

Name of Employer Occupation
WAL-MART PHARMACIST

Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
230.00

Date of Receipt

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

Transaction ID: SA11AI.50582

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

--

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50184**

0108915-0000093

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50484**

0102751-0000386

C. Form/Schedule : **SA11AI**

0013298-0000484

Transaction ID : **SA11AI.50582**

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

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

FOR LINE NUMBER: PAGE 48 / 70

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
MR MARK SHIRLEY

Mailing Address 14806 CANTWELL BND

City State Zip Code
CYPRESS TX 77429

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

Name of Employer Occupation
WM SHIRLEY BUSINESS OWNER

Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: SA11AI.50579

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
DIANA SISK

Mailing Address 1509 LAKEWOOD DR

City State Zip Code
LEXINGTON KY 40502

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

Name of Employer Occupation
PARACLETE CHRISTIAN COUNSELING COUNSELOR

Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: SA11AI.50311

Amount of Each Receipt this Period

500.00

C.

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

Mailing Address 9143 COAL BANK RD

City State Zip Code
MARSHALLVILLE OH 44645

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

Name of Employer Occupation
SELF FARMING

Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
2000.00

Date of Receipt

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

Transaction ID: SA11AI.50327

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

--

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50579**

0105519-0000480

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50311**

0108359-0000215

C. Form/Schedule : **SA11AI**

0097722-0000233

Transaction ID : **SA11AI.50327**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 70
(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 HELEN A STEFELY

Mailing Address 941 S EUCLID AVE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	5	/	2	0	1	1

Transaction ID: SA11AI.50461

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
STEPHEN TITUS

Mailing Address 36 MOUNTAIN VIEW RD

City State Zip Code
MORGANTOWN PA 19543

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

Name of Employer Occupation
THE TITUS CO BUSINESS OWNER

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	1	1

Transaction ID: SA11AI.50138

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS GLENDA WEATHERLY

Mailing Address PO BOX 1245

City State Zip Code
WHEELER TX 79096

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: SA11AI.50606

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50461**

0006449-0000363

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50138**

0108863-0000049

C. Form/Schedule : **SA11AI**

0102813-0000505

Transaction ID : **SA11AI.50606**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 70
(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 JIM M WEISERT

Mailing Address 6535 E SANTA AURELIA

City TUCSON State AZ Zip Code 85715

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

Name of Employer PROVIDENCE THREE Occupation SELF EMPLOYEED

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 04 / 06 / 2011
Transaction ID: SA11AI.50657
 Amount of Each Receipt this Period: 250.00

B.

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

Mailing Address 3325 CAMINO VALLAREAL

City ESCONDIDO State CA Zip Code 92029

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

Name of Employer SELF Occupation TRUSTEE

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 06 / 2011
Transaction ID: SA11AI.50689
 Amount of Each Receipt this Period: 500.00

C.

Full Name (Last, First, Middle Initial)
MR CHARLES M ZEISER

Mailing Address 510 ROLLING WAY

City SIGNAL MOUNTAIN State TN Zip Code 37377

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

Name of Employer SOUTHERN CHAMPIOIN TRAY LP. Occupation CHAIRMAN OF THE BOARD

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 04 / 01 / 2011
Transaction ID: SA11AI.50284
 Amount of Each Receipt this Period: 2000.00

SUBTOTAL of Receipts This Page (optional)	2750.00
TOTAL This Period (last page this line number only)	34865.00

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50657**

0104406-0000556

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.50689**

0103506-0000587

C. Form/Schedule : **SA11AI**

0097422-0000188

Transaction ID : **SA11AI.50284**

**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) 1st Virginia Community Bank Mailing Address 11325 Random Hills Road City Fairfax State VA Zip Code 22030 Purpose of Disbursement BANK FEES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.50804 Date of Disbursement 04 / 26 / 2011 Amount of Each Disbursement this Period 45.13
B.	Full Name (Last, First, Middle Initial) 1st Virginia Community Bank Mailing Address 11325 Random Hills Road City Fairfax State VA Zip Code 22030 Purpose of Disbursement BANK FEES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.50802 Date of Disbursement 04 / 30 / 2011 Amount of Each Disbursement this Period 58.40
C.	Full Name (Last, First, Middle Initial) AMERICAN VALUES Mailing Address 2800 SHIRLINGTON RD #950 City ARLINGTON State VA Zip Code 22206 Purpose of Disbursement PAC LIST RENTAL AT FAIR MARKET Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.50823 Date of Disbursement 04 / 26 / 2011 Amount of Each Disbursement this Period 2078.11

SUBTOTAL of Disbursements This Page (optional) ▶

2181.64

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.50817
	Mailing Address P.O. Box 580363	Date of Disbursement 04 / 08 / 2011
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 35.00
	Purpose of Disbursement BANK FEES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.50798
	Mailing Address P.O. Box 580363	Date of Disbursement 04 / 15 / 2011
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 204.14
	Purpose of Disbursement BANK FEES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.50794
	Mailing Address P.O. Box 580363	Date of Disbursement 04 / 22 / 2011
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 20.50
	Purpose of Disbursement BANK FEES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	259.64
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.50803
	Mailing Address P.O. Box 580363	Date of Disbursement 04 / 30 / 2011
	City Charlotte State NC Zip Code 28258	Amount of Each Disbursement this Period 1318.01
	Purpose of Disbursement BANK FEES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CAPITOL ADVANTAGE	Transaction ID: SB21B.50825
	Mailing Address P.O. BOX 2018	Date of Disbursement 04 / 26 / 2011
	City MERRIFIELD State VA Zip Code 22116	Amount of Each Disbursement this Period 6600.00
	Purpose of Disbursement DUES & SUBSCRIPTIONS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CHOI COMPANIES	Transaction ID: SB21B.50824
	Mailing Address 5999 STEVENSON AVE #310	Date of Disbursement 04 / 26 / 2011
	City ALEXANDRIA State VA Zip Code 22304	Amount of Each Disbursement this Period 2847.95
	Purpose of Disbursement RENT	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	10765.96
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

<p>A. Full Name (Last, First, Middle Initial) FEDERAL EXPRESS</p> <p>Mailing Address P.O. BOX 1140</p> <p>City MEMPHIS State TN Zip Code 38101</p> <p>Purpose of Disbursement SHIPPING FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.50827</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="79.59"/></p>
<p>B. Full Name (Last, First, Middle Initial) HELLER INFORMATION SERVICES</p> <p>Mailing Address 12450 Parklawn Drive</p> <p>City Rockville State MD Zip Code 20852</p> <p>Purpose of Disbursement COMPUTER SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.50821</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="540.00"/></p>
<p>C. 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</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.50822</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="249.13"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="868.72"/>
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) LEXIS NEXIS	Transaction ID: SB21B.50829 Date of Disbursement 04 / 26 / 2011
	Mailing Address P.O. BOX 7247-7090	
	City PHILADELPHIA State PA Zip Code 19170	Amount of Each Disbursement this Period 350.00
	Purpose of Disbursement DUES & SUBSCRIPTIONS 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.50826 Date of Disbursement 04 / 08 / 2011
	Mailing Address P.O. BOX 2325	
	City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period 870.75
	Purpose of Disbursement PAC DATA PROCESSING SERVICES Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) LPS	Transaction ID: SB21B.50838 Date of Disbursement 04 / 26 / 2011
	Mailing Address P.O. BOX 2325	
	City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period 77.77
	Purpose of Disbursement PAC DATA PROCESSING SERVICES Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1298.52
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) THE MAIL HAUS Mailing Address 1709 SUBURBAN DRIVE City DEPERE State WI Zip Code 54115 Purpose of Disbursement PAC DIRECT MAIL PRODUCTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.50834 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 1 1
	Category/ Type	Amount of Each Disbursement this Period 3632.05

B. Full Name (Last, First, Middle Initial) U.S. POSTMASTER Mailing Address MAIN POST OFFICE City WASHINGTON State DC Zip Code 20000 Purpose of Disbursement PAC GEN OFFICE POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.50816 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 1 1
	Category/ Type	Amount of Each Disbursement this Period 12.13

C. Full Name (Last, First, Middle Initial) U.S. POSTMASTER Mailing Address MAIN POST OFFICE City WASHINGTON State DC Zip Code 20000 Purpose of Disbursement PAC REPLENISH BRE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.50805 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1
	Category/ Type	Amount of Each Disbursement this Period 250.00

SUBTOTAL of Disbursements This Page (optional) ▶	3894.18
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) VERIZON	Transaction ID: SB21B.50835
	Mailing Address P.O. BOX 17577	Date of Disbursement 04 / 26 / 2011
	City BALTIMORE State MD Zip Code 21297	Amount of Each Disbursement this Period 454.49
	Purpose of Disbursement TELEPHONE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) DEAN VIRAG	Transaction ID: SB21B.50818
	Mailing Address 14039 WESTWIND LANE	Date of Disbursement 04 / 08 / 2011
	City CULPEPER State VA Zip Code 22701	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement WEBSITE SUPPORT	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) WASHINGTON INTELLIGENCE BUREAU	Transaction ID: SB21B.50839
	Mailing Address 4128 PEPSI PLACE	Date of Disbursement 04 / 26 / 2011
	City CHANTILLY State VA Zip Code 20151	Amount of Each Disbursement this Period 1081.43
	Purpose of Disbursement PAC CAGING AND DATA ENTRY SERVICES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2035.92
TOTAL This Period (last page this line number only)	28444.79

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 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 1472.00		Transaction ID: SD10.50084	
Amount Incurred This Period 0.00	Payment This Period 1472.00	Outstanding Balance at Close of This Period 0.00	

B. 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	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LPS			Nature of Debt (Purpose): PAC DATA PROCESSING SERVICES
Mailing Address P.O. BOX 2325			
City FAIRFAX	State VA	ZIP Code 22031	

Outstanding Balance Beginning This Period 870.75		Transaction ID: SD10.50086	
Amount Incurred This Period 0.00	Payment This Period 870.75	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	223.11
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 LPS			Nature of Debt (Purpose): PAC DATA PROCESSING SERVI- CES
Mailing Address P.O. BOX 2325			
City FAIRFAX	State VA	ZIP Code 22031	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.50837	
Amount Incurred This Period <input type="text" value="77.77"/>	Payment This Period <input type="text" value="77.77"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LPS			Nature of Debt (Purpose): PAC DATA PROCESSING SERVI- CES
Mailing Address P.O. BOX 2325			
City FAIRFAX	State VA	ZIP Code 22031	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.50840	
Amount Incurred This Period <input type="text" value="583.78"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="583.78"/>	

C. 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 ELKRIDGE	State MD	ZIP Code 21075	

Outstanding Balance Beginning This Period <input type="text" value="2320.90"/>		Transaction ID: SD10.4696	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2320.90"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="2904.68"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 68 / 70
	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
Mailing Address 4128 PEPSI PLACE	
City State ZIP Code CHANTILLY VA 20151	

Outstanding Balance Beginning This Period 1081.43	Transaction ID: SD10.50085	
Amount Incurred This Period 0.00	Payment This Period 1081.43	Outstanding Balance at Close of This Period 0.00

B. 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 0.00	Transaction ID: SD10.50841	
Amount Incurred This Period 968.79	Payment This Period 0.00	Outstanding Balance at Close of This Period 968.79

1) SUBTOTALS This Period This Page (optional).....	968.79
2) TOTALS This Period (last page this line number only).....	4096.58
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)	4096.58

**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 4 / 2 6 / 2 0 1 1	9375.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	9375.00	Transaction ID: H3.50843
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)	9375.00
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)	9375.00

**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 69500.00		
City ARLINGTON	State VA	Zip Code 22206	Date <input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2011"/>		
Purpose of Disbursement: PAC CONSULTING POLITICAL AND GEN ADMIN			Transaction ID: H4.50806		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6625.00		6625.00		13250.00

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 72250.00		
City ARLINGTON	State VA	Zip Code 22206	Date <input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2011"/>		
Purpose of Disbursement: PAC POLITICAL RESEARCHER WRITER			Transaction ID: H4.50807		
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 75000.00		
City Arlington	State VA	Zip Code 22206	Date <input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2011"/>		
Purpose of Disbursement: PAC ACCOUNTING SERVICES			Transaction ID: H4.50808		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1375.00		1375.00		2750.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9375.00		9375.00		18750.00

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
9375.00		9375.00		18750.00