

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Committee for Working Families, Sponsored by Labor Organizations

ADDRESS (number and street) 555 Capitol Mall, Suite 400
Check if different than previously reported. (ACC) Sacramento CA 95814

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00626119 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2021 through 12 / 31 / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Pulaski, Art, , ,
Type or Print Name of Treasurer

Signature of Treasurer Pulaski, Art, , , [Electronically Filed] Date 01 / 28 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Committee for Working Families, Sponsored by Labor Organizations

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>	<input type="text" value="168509.47"/>	<input type="text" value="168509.47"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="188637.40"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="165089.07"/>	<input type="text" value="190166.20"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="353726.47"/>	<input type="text" value="358675.67"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="50720.43"/>	<input type="text" value="55669.63"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="303006.04"/>	<input type="text" value="303006.04"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

Committee for Working Families, Sponsored by Labor Organizations

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	115000.00	115000.00
(ii) Unitemized	25.00	25.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	115025.00	115025.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	50000.00	75000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	165025.00	190025.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	64.07	141.20
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	165089.07	190166.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	165089.07	190166.20

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	11971.12	16920.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	11971.12	16920.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	38749.31	38749.31
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	50720.43	55669.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50720.43	55669.63

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	165025.00	190025.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	165025.00	190025.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	11971.12	16920.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11971.12	16920.32

**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 OF 12
<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)
Committee for Working Families, Sponsored by Labor Organizations

A. Preston-Werner Initiatives, Inc.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 Mason Street #1107
 City San Francisco State CA Zip Code 94108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 08 / 16 / 2021
Transaction ID : INCA713
 Amount of Each Receipt this Period 15000.00
 Memo Item

B. International Alliance of Theatrical and Stage Employees District 2 and MPTAAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10061 Riverside Drive, Suite 825
 City Toluca Lake State CA Zip Code 91602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 07 / 2021
Transaction ID : INCA715
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. International Alliance of Theatrical and Stage Employees District 2 and MPTAAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10061 Riverside Drive, Suite 825
 City Toluca Lake State CA Zip Code 91602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 14 / 2021
Transaction ID : INCA716
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	25000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 12
	<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)
Committee for Working Families, Sponsored by Labor Organizations

A. Communication Workers of America

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 3rd Street NW

City Washington	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
40000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2021

Transaction ID : INCA720

Amount of Each Receipt this Period
20000.00

Memo Item

B. Cotchett, Pitre & McCarthy, LLP

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 840 Malcolm Road, Suite 200

City Burlingame	State CA	Zip Code 94010
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2021

Transaction ID : INCA721

Amount of Each Receipt this Period
50000.00

Memo Item

C. Communication Workers of America

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 3rd Street NW

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
40000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2021

Transaction ID : INCA729

Amount of Each Receipt this Period
20000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	90000.00
TOTAL This Period (last page this line number only).....	115000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Committee for Working Families, Sponsored by Labor Organizations

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
California Federation of Teachers COPE

Mailing Address 2550 North Hollywood Way, #400

City Burbank	State CA	Zip Code 91505
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2021

Transaction ID : INCA719

Amount of Each Receipt this Period
25000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
American Federation of Teachers, AFL-CIO Committee on Political Education (FED PAC ID# C00)

Mailing Address 555 New Jersey Avenue, NW

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2021

Transaction ID : INCA714

Amount of Each Receipt this Period
25000.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	50000.00
TOTAL This Period (last page this line number only).....▶	50000.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

Committee for Working Families, Sponsored by Labor Organizations

Full Name (Last, First, Middle Initial)

A. Olson Remcho LLP

Mailing Address 555 Capitol Mall, Suite 400

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
Legal & Reporting Services

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EXPB705

Amount of Each Disbursement this Period

2192.20

Memo Item

Full Name (Last, First, Middle Initial)

B. Olson Remcho LLP

Mailing Address 555 Capitol Mall, Suite 400

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
Legal and Reporting Services

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EXPB718

Amount of Each Disbursement this Period

1370.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Olson Remcho LLP

Mailing Address 555 Capitol Mall, Suite 400

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
Legal & Reporting Services

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	3			2	0	2	1		

FEC Identification Number

C

Transaction ID : EXPB726

Amount of Each Disbursement this Period

3470.22

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

7032.42

**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"/> 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)

Committee for Working Families, Sponsored by Labor Organizations

Full Name (Last, First, Middle Initial)

A. Olson Remcho LLP

Mailing Address 555 Capitol Mall, Suite 400

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Legal & Reporting Services

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2021

FEC Identification Number

C

Transaction ID : EXPB727

Amount of Each Disbursement this Period

2259.20

Memo Item

Full Name (Last, First, Middle Initial)

B. Olson Remcho LLP

Mailing Address 555 Capitol Mall, Suite 400

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Legal & Reporting Services

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2021

FEC Identification Number

C

Transaction ID : EXPB734

Amount of Each Disbursement this Period

1278.50

Memo Item

Full Name (Last, First, Middle Initial)

C. Olson Remcho LLP

Mailing Address 555 Capitol Mall, Suite 400

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Legal & Reporting Services

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2021

FEC Identification Number

C

Transaction ID : EXPB736

Amount of Each Disbursement this Period

1351.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

4888.70

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

11921.12

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

Committee for Working Families, Sponsored by Labor Organizations

Full Name (Last, First, Middle Initial)

A. ScanArt

Mailing Address 1259 Park Avenue

City
Emeryville

State
CA

Zip Code
94608

Purpose of Disbursement
Flyers; In-Kind contribution to non-federal committee

011

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB711

Amount of Each Disbursement this Period

[REDACTED] 3691.61

Memo Item

Full Name (Last, First, Middle Initial)

B. San Diego Works! Sponsored by San Diego-Imperial Counties Labor Council AFL_CIO

Mailing Address 3737 Camino Del Rio South, Suite 4

City
San Diego

State
CA

Zip Code
92108

Purpose of Disbursement
Contribution to non-federal committee

011

Category/
Type

Candidate Name
San Diego Works! Sponsored by San Diego-Imperial Counties Labor Council AFL_CIO

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB706

Amount of Each Disbursement this Period

[REDACTED] 10000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. - No on the Recall of Gov. Gavin Newsom, a spon. committee of Alameda Labor Council, AFL-C

Mailing Address 555 Capitol Mall, Suite 400

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
- No on the Recall of Gov. Gavin Newsom, a spon. committee of Alameda Labor Council, AFL-C

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB717

Amount of Each Disbursement this Period

[REDACTED] 10000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

[REDACTED] 23691.61

[REDACTED]

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

Committee for Working Families, Sponsored by Labor Organizations

Full Name (Last, First, Middle Initial)

A. ScanArt

Mailing Address 1259 Park Avenue

City
Emeryville

State
CA

Zip Code
94608

Purpose of Disbursement
Flyers; In-kind contribution to non-federal committee

011

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2021

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB712

Amount of Each Disbursement this Period

[REDACTED] 15057.70

Memo Item

Full Name (Last, First, Middle Initial)

B. ScanArt

Mailing Address 1259 Park Avenue

City
Emeryville

State
CA

Zip Code
94608

Purpose of Disbursement
Void Check

011

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2021

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB731

Amount of Each Disbursement this Period

[REDACTED] - 15057.70

Memo Item

Full Name (Last, First, Middle Initial)

C. ScanArt

Mailing Address 1259 Park Avenue

City
Emeryville

State
CA

Zip Code
94608

Purpose of Disbursement
Flyers; In-Kind contribution to non-federal committee

011

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2021

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB732

Amount of Each Disbursement this Period

[REDACTED] 15057.70

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

[REDACTED] 15057.70

[REDACTED] 38749.31