

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 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 checked="" 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 06 01 2008 through 06 30 2008

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

Type or Print Name of Treasurer Amy Myers

Signature of Treasurer Electronically Filed by Amy Myers Date 07 18 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		1339727.01
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	1524828.61									
(c) Total Receipts (from Line 19)	125836.63	488894.84								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1650665.24	1828621.85								
7. Total Disbursements (from Line 31)	28144.25	206100.86								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1622520.99	1622520.99								
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)	14491.89									

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	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	79441.00	323261.00
(i) Itemized (use Schedule A)	45323.41	157882.32
(ii) Unitemized	124764.41	481143.32
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	124764.41	481143.32
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	234.83
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1072.22	7516.69
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	125836.63	488894.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	125836.63	488894.84

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	28144.25	204000.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	28144.25	204000.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2000.00
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	0.00	100.00
(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	100.00
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))..	28144.25	206100.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28144.25	206100.86

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	124764.41	481143.32
34. Total Contribution Refunds (from Line 28(d))	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	124764.41	481043.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	28144.25	204000.86
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	234.83
38. Net Operating Expenditures (subtract Line 37 from Line 36)	28144.25	203766.03

**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 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) DR NATHANIEL E ADAMSON, JR	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 2600 BARRACKS RD APT 289	Transaction ID: SA11AI.9775
	City State Zip Code CHARLOTTEVA 22901	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) MR JAMES I ANTHONY, JR	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 3336 ALLEGHANY DR	Transaction ID: SA11AI.9847
	City State Zip Code RALEIGH NC 27609	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation ANTHONY & CO REAL ESTATE	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) MR CHARLES D AYRES	Date of Receipt MM / DD / YYYY 06 / 05 / 2008
	Mailing Address 4911 CASA ORO DR	Transaction ID: SA11AI.11326
	City State Zip Code YORBA LINDA CA 92886	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	675.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 160
	<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) DAVID BAIN		Date of Receipt
	Mailing Address 1000 PECAN DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	FAIRVIEW	TX	75069
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.10878
	Amount of Each Receipt this Period		<input type="text"/> 50.00
Name of Employer CORWIN ENGINEERING INC		Occupation ENGINEER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 250.00	

B.	Full Name (Last, First, Middle Initial) MRS ANNALYNE H BARNET		Date of Receipt
	Mailing Address 4734 TALLEYBROOK DR NW		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	KENNESAW	GA	30152
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.9955
	Amount of Each Receipt this Period		<input type="text"/> 75.00
Name of Employer HOMEMAKER		Occupation HOMEMAKER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 250.00	

C.	Full Name (Last, First, Middle Initial) RICHARD BARTON		Date of Receipt
	Mailing Address 5171 INVERNESS DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	POST FALLS	ID	83854
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.11100
	Amount of Each Receipt this Period		<input type="text"/> 250.00
Name of Employer U.S. BANK		Occupation BANKER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 375.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 160
	(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 CINDY M BAUR	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 2601 SW 14TH COURT	Transaction ID: SA11AI.10045
	City State Zip Code DEERFIELD BEACH FL 33442	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MECE PRESCHOOL KINDERGARTEN AIDE	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) DR GARY R BISHOP	Date of Receipt MM / DD / YYYY 06 / 05 / 2008
	Mailing Address 15144 LARRY ST	Transaction ID: SA11AI.11248
	City State Zip Code POWAY CA 92064	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RIVERSIDE COUNTY PHARMACIST	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) MR KENNETH N BLACKBURN	Date of Receipt MM / DD / YYYY 06 / 23 / 2008
	Mailing Address 10 SHALLOWBROOK DR	Transaction ID: SA11AI.10681
	City State Zip Code O FALLON IL 62269	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation USAF PILOT	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

SUBTOTAL of Receipts This Page (optional)	335.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 160
	<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 RONALD J BOOMSTRA		Date of Receipt MM / DD / YYYY 06 / 25 / 2008		
	Mailing Address 585 BIRCHWOOD ST		Transaction ID: SA11AI.10372		
	City JACKSON	State MI	Zip Code 49203	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer RETIRED	Occupation RETIRED MILITARY			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00			

B.	Full Name (Last, First, Middle Initial) MRS JEAN M BORDUIN		Date of Receipt MM / DD / YYYY 06 / 23 / 2008		
	Mailing Address 200 BLACK SKIMMER CT		Transaction ID: SA11AI.9724		
	City EDGEWATER	State MD	Zip Code 21037	Amount of Each Receipt this Period 700.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer RETIRED	Occupation RETIRED			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00			

C.	Full Name (Last, First, Middle Initial) MR RONALD A BOSS		Date of Receipt MM / DD / YYYY 06 / 25 / 2008		
	Mailing Address 977 COACHWAY		Transaction ID: SA11AI.9737		
	City ANNAPOLIS	State MD	Zip Code 21401	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer RETIRED	Occupation RET			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00			

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 10 / 160
(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 TERRY O BRISTOL

Mailing Address 344 E FOOTHILLS PKWY
RED ROOM 9-W

City State Zip Code
FORT COLLINS CO 80525

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.11063

Amount of Each Receipt this Period
50.00

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

Mailing Address 12789 MUIRFIELD BLVD N

City State Zip Code
JACKSONVILLE FL 32225

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

Name of Employer SMURFIT STORE CONT. CORP
Occupation GEN MGR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.10002

Amount of Each Receipt this Period
100.00

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

Mailing Address 12789 MUIRFIELD BLVD N

City State Zip Code
JACKSONVILLE FL 32225

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

Name of Employer SMURFIT STORE CONT. CORP
Occupation GEN MGR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.10003

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 200.00

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

**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 11 / 160
	<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) DALE BROWN		Date of Receipt
	Mailing Address P O BOX 5562		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 6 / 2 5 / 2 0 0 8
	City	State	Zip Code
	MIDLAND	TX	79074
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11018
Name of Employer INFO REQUESTED- NOT RECD		Occupation INFO REQUESTED- NOT RECD	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00

B.	Full Name (Last, First, Middle Initial) RITA BROWN		Date of Receipt
	Mailing Address P.O. BOX 5562		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 6 / 2 5 / 2 0 0 8
	City	State	Zip Code
	MIDLAND	TX	79074
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11566
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00

C.	Full Name (Last, First, Middle Initial) MRS TONYA BRUMMERSTEDT		Date of Receipt
	Mailing Address 465 NORMAN DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 6 / 0 3 / 2 0 0 8
	City	State	Zip Code
	GROVELAND	IL	61535
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10660
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 10500.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 12 / 160
(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)
WILLIAM P BUCK, JR
 Mailing Address 2084 BROOK HIGHLAND RDG
 City BIRMINGHAM State AL Zip Code 35242
 Date of Receipt 06 / 24 / 2008
 Transaction ID: SA11AI.10091
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer INFO REQUESTED- NOT RECD Occupation INFO REQUESTED- NOT RECD
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date 600.00

B. Full Name (Last, First, Middle Initial)
GREG BURNS
 Mailing Address 42782 SUMMERHOUSE PLACE
 City ASHBURN State VA Zip Code 20148
 Date of Receipt 06 / 25 / 2008
 Transaction ID: SA11AI.10866
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer INFO REQUESTED- NOT RECD Occupation INFO REQUESTED- NOT RECD
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date 700.00

C. Full Name (Last, First, Middle Initial)
MR EARLE CANTY
 Mailing Address 5467 SAUNDERS AVE
 City LOOMIS State CA Zip Code 95650
 Date of Receipt 06 / 30 / 2008
 Transaction ID: SA11AI.11407
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NOVOSTENT CORPORATION Occupation VICE PRESIDENT
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date 500.00

SUBTOTAL of Receipts This Page (optional) ► 850.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 13 / 160
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial)
MR DAVID S CARROLL, JR

Mailing Address 235 RIVEREDGE CV

City State Zip Code
CORDOVA TN 38018

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

Name of Employer Occupation
USAGE DEFINED SOFTWARE SOFTWARE DEVELOPER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.10155

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR ARTHUR CERMINARA

Mailing Address 4409 DOVER RD APT D

City State Zip Code
LOUISVILLE KY 40216

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	4	/	2	0	0	8

Transaction ID: SA11AI.10173

Amount of Each Receipt this Period
50.00

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

Mailing Address 1023 NE 98TH ST

City State Zip Code
SEATTLE WA 98115

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

Name of Employer Occupation
NORTHWEST HOSP C. T. TECHNOLOGIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.11518

Amount of Each Receipt this Period
50.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 160
	<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 FRANCES CLARK		Date of Receipt
	Mailing Address 907 COLONY RIDGE CT		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 20 / 2008
	City	State	Zip Code
	IRVING	TX	75061
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10875
Name of Employer INFO REQUESTED- NOT RECD		Occupation INFO REQUESTED- NOT RECD	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 200.00
		<input type="text"/> 292.00	

B.	Full Name (Last, First, Middle Initial) MRS MURIEL COFFMAN		Date of Receipt
	Mailing Address 11603 N 86TH ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2008
	City	State	Zip Code
	SCOTTSDALE	AZ	85260
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11126
Name of Employer HOUSEWIFE		Occupation HOUSEWIFE - HOUSBAND RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 300.00	

C.	Full Name (Last, First, Middle Initial) MS SHARON COMBS		Date of Receipt
	Mailing Address 208 S OAK AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2008
	City	State	Zip Code
	BROKEN ARROW	OK	74012
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10844
Name of Employer SHARON COMBS INTERIORS- INC.		Occupation INTERIOR DESIGNER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 400.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 160
(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 RICHARD E COOLEY

Mailing Address 617 KESTREL CT

City State Zip Code
WOODSTOCK VA 22664

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

Name of Employer SELF EMPLOYED Occupation ACCOUNTANT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.9771

Amount of Each Receipt this Period
50.00

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

Mailing Address 20191 GLEEDSVILLE RD

City State Zip Code
LEESBURG VA 20175

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

Name of Employer INFO REQUESTED- NOT RECD Occupation SELF-EMPLOYED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.9710

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
MR ROGER DAVIS, RET

Mailing Address 8160 TIARA ST

City State Zip Code
VENTURA CA 93004

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.11335

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **2650.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 160
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial)
MR THOMAS E DEHM
Mailing Address 1010 NE PURCELL BLVD APT 136
City BEND State OR Zip Code 97701
FEC ID number of contributing federal political committee. **C**
Name of Employer: INFO REQUESTED- NOT RECD Occupation: INFO REQUESTED- NOT RECD
Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt: 06 / 30 / 2008
Transaction ID: SA11AI.11489
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
MR LEONARD A DEO
Mailing Address 2 SYLDEO DR
City PARSIPPANY State NJ Zip Code 07054
FEC ID number of contributing federal political committee. **C**
Name of Employer: FLOWERS & GIFTS- INC. Occupation: FLORIST
Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 06 / 05 / 2008
Transaction ID: SA11AI.9530
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
MS LAURA DESKINS
Mailing Address 3805 AGAPE LN
City AUSTIN State TX Zip Code 78735
FEC ID number of contributing federal political committee. **C**
Name of Employer: RETIRED Occupation: MOTHER
Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00
Date of Receipt: 06 / 30 / 2008
Transaction ID: SA11AI.11003
Amount of Each Receipt this Period: 500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 160
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

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

Mailing Address 9 CHERRYWOOD DR

City EAST NORTHPORT State NY Zip Code 11731

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.9570

Amount of Each Receipt this Period
 100.00

B.

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

Mailing Address 9 CHERRYWOOD DR

City EAST NORTHPORT State NY Zip Code 11731

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.9571

Amount of Each Receipt this Period
 100.00

C.

Full Name (Last, First, Middle Initial)
MRS KATHLEEN A ECHELBARGER

Mailing Address 16207 LARCH WAY

City LYNNWOOD State WA Zip Code 98087

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.11517

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional) ► 700.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 160
(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 CRAIG W EGLOFF

Mailing Address 27001 HWY 128

City YORKVILLE State CA Zip Code 95494

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

Name of Employer JAYMES & JAYMES Occupation INSURANCE BROKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2450.00

Date of Receipt: MM / DD / YYYY
06 / 25 / 2008

Transaction ID: SA11AI.11400

Amount of Each Receipt this Period: 250.00

B.

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

Mailing Address 302 CINDI CT

City LONGVIEW State TX Zip Code 75605

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

Name of Employer MISSIONARY TECH TEAM Occupation ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: MM / DD / YYYY
06 / 25 / 2008

Transaction ID: SA11AI.10901

Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
MRS JANICE ERICKSON

Mailing Address PO BOX 3006

City BOTHELL State WA Zip Code 98041

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

Name of Employer CE PUBLICATIONS- INC. Occupation PUBLISHER/EDITOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.11511

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

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

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

FOR LINE NUMBER: PAGE 19 / 160
(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)
AARON FLEMING

Mailing Address 1801 FAIRFOREST DR

City State Zip Code
MONTGOMERY AL 36106

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

Name of Employer EASTWOOD PRESBYTERIAN CHURCH MONTGOMERY Occupation PASTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.10096

Amount of Each Receipt this Period
500.00

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

Mailing Address 11143 PHILADELPHIA RD

City State Zip Code
WHITE MARSH MD 21162

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

Name of Employer NORTHRUP GRUMMAN Occupation ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.9727

Amount of Each Receipt this Period
600.00

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

Mailing Address 2909 LOVERS LN

City State Zip Code
SAINT JOSEPH MO 64506

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.10717

Amount of Each Receipt this Period
250.00

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

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

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

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

FOR LINE NUMBER: PAGE 20 / 160
(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 FRANCIS L FRIEND

Mailing Address 2125 LUANN LN APT 6

City MADISON State WI Zip Code 53713

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

Name of Employer INTERVARSITY CHRISTIAN FELLOWSHIP Occupation MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 05 / 2008
Transaction ID: SA11AI.10468
 Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
MR ERWIN R FRIESEN

Mailing Address PO BOX 342

City HATHAWAY PINES State CA Zip Code 95233

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 16 / 2008
Transaction ID: SA11AI.11394
 Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
MR ROBERT A FULLMER

Mailing Address 2552 WALNUT AVE STE 230

City TUSTIN State CA Zip Code 92780

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

Name of Employer SELF Occupation CONSTRUCTION

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 06 / 25 / 2008
Transaction ID: SA11AI.11272
 Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ► **5075.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 160
(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 DENNIS A GOLDENMAN

Mailing Address 2016 18TH AVE

City State Zip Code
MONROE WI 53566

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

Name of Employer Occupation
THE SWISS COLONY INC ACCOUNTANT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 16 / 2008

Transaction ID: SA11AI.10464

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MR BOBBI J GOOD

Mailing Address 18161 BASTANCHURY RD

City State Zip Code
YORBA LINDA CA 92886

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

Name of Employer Occupation
ROSE DRIVE FRIENDS CHURCH ADMINISTRATOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 16 / 2008

Transaction ID: SA11AI.11327

Amount of Each Receipt this Period
50.00

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

Mailing Address 541 PINEHAVEN DRIVE

City State Zip Code
HOUSTON TX 77024

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

Name of Employer Occupation
GREEN SERVICES INTERNATIONAL PRESIDENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 27 / 2008

Transaction ID: SA11AI.10938

Amount of Each Receipt this Period
200.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 160
(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 CARL W GUSTKE

Mailing Address 233 STATON RD

City State Zip Code
CABOT AR 72023

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.10807

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
BRUCE A HALL

Mailing Address 5611 189TH ST E

City State Zip Code
PUYALLUP WA 98375

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

Name of Employer Occupation
HALL FOREST PRODUCTS- INC BUSINESS OWNER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.11528

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
BRUCE A HALL

Mailing Address 5611 189TH ST E

City State Zip Code
PUYALLUP WA 98375

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

Name of Employer Occupation
HALL FOREST PRODUCTS- INC BUSINESS OWNER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.11529

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **250.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 160
(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 WILLIS HAMILTON

Mailing Address 345 W MEATS AVE

City State Zip Code
ORANGE CA 92865

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

Name of Employer Occupation
HAMILTON MATERIALS INC OWNER

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

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.11321

Amount of Each Receipt this Period

500.00

B.

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

Mailing Address CMR 445 BOX 278

City State Zip Code
APO AE 09046

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

Name of Employer Occupation
DODDS SCHOOL NURSE

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

Date of Receipt

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

Transaction ID: SA11AI.9549

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
MRS SHARON M HAST

Mailing Address 203 EMMONS ST SE

City State Zip Code
CALEDONIA MI 49316

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

Name of Employer Occupation
CALEDONIA SCHOOLS BUSINESS OWNER/BUS DRIVER

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

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.10377

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 160
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

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

Mailing Address 5924 CHILDRESS AVE

City SAINT LOUIS State MO Zip Code 63109

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

Name of Employer SELF EMPLOYED Occupation REALTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 06 / 05 / 2008
Transaction ID: SA11AI.10702
 Amount of Each Receipt this Period: 25.00

B.

Full Name (Last, First, Middle Initial)
MRS RUTH A HEACOCK

Mailing Address 645 NE PENN AVE

City BEND State OR Zip Code 97701

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

Name of Employer EASTMENT CHURCH Occupation TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 23 / 2008
Transaction ID: SA11AI.11490
 Amount of Each Receipt this Period: 145.00

C.

Full Name (Last, First, Middle Initial)
MR GREGG P HEALEY

Mailing Address 61 E MEADOW RD

City WILTON State CT Zip Code 06897

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

Name of Employer SELF Occupation FINANCE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 30 / 2008
Transaction ID: SA11AI.9527
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 270.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 160
(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 BONNIE M HEATH, III

Mailing Address 7145 NW 125TH STREET RD

City State Zip Code
REDDICK FL 32686

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

Name of Employer Occupation
BONNIE HEATH FARM LLC THOROUGHBRED HORSE FRAM

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 25 / 2008

Transaction ID: SA11AI.10021

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JUDITH L HENDERSON

Mailing Address 1100 QUEENS COURT

City State Zip Code
NAPERVILLE IL 60563

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2008

Transaction ID: SA11AI.10643

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BRIAN HENRY

Mailing Address 2495 DELLWOOD DR NW

City State Zip Code
ATLANTA GA 30305

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

Name of Employer Occupation
GEORGIA SIGN CO VICE PRESIDENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 27 / 2008

Transaction ID: SA11AI.9964

Amount of Each Receipt this Period
100.00

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

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

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

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

FOR LINE NUMBER: PAGE 26 / 160
(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 SHARON HERSCHEND

Mailing Address 1144 LAKESIDE DR

City State Zip Code
BRANSON MO 65616

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.10731

Amount of Each Receipt this Period
1000.00

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

Mailing Address 157 NE COAL LN

City State Zip Code
TRENTON MO 64683

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

Name of Employer HOME Occupation FAMILY MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.10718

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
REV HARRIS HIMES

Mailing Address PO BOX 540

City State Zip Code
HAMILTON MT 59840

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10593

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2300.00**

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

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

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

FOR LINE NUMBER: PAGE 27 / 160
(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 IVAN HINRICHS

Mailing Address 6101 CARNEGIE BLVD STE 400

City State Zip Code
CHARLOTTE NC 28209

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

Name of Employer Occupation
HFCB EMPLOYEE BENEFITS

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	3	/	2	0	0	8

Transaction ID: SA11AI.9871

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MRS KAREN L HOBSON

Mailing Address 18502 OWL FOREST CT

City State Zip Code
HOUSTON TX 77084

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: SA11AI.10953

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR JOHN A HOCEVAR

Mailing Address 32329 WHITE RD

City State Zip Code
WICKLIFFE OH 44092

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

Name of Employer Occupation
SELF INSURANCE AGENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	3	/	2	0	0	8

Transaction ID: SA11AI.10213

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 160

(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
MR MICHAEL A HODGE

Mailing Address 3262 SANDHURST CT

City State Zip Code
CAMERON PARK CA 95682

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

Name of Employer
CAMERON PARK CONSULTING SERVICE

Occupation
CONSULTANT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.11410

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
MRS JULIE HOLSING

Mailing Address 1360 4TH AVE SW

City State Zip Code
LE MARS IA 51031

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

Name of Employer
SIONX CITY IA

Occupation
HOSPIC OF SIONXLAND

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.10426

Amount of Each Receipt this Period

300.00

C.

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

Mailing Address 5500 MAHOGANY RUN CT

City State Zip Code
PLANO TX 75093

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

Name of Employer
PREMIER MTG CO INC

Occupation
PRESIDENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.10887

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2850.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 29 / 160
(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 SUSAN M HUMPHRIES

Mailing Address 8 N SAGEBRUSH ST

City State Zip Code
WICHITA KS 67230

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	7	/	2	0	0	8

Transaction ID: SA11AI.10763

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
DR DAVID S HUNGERFORD

Mailing Address 10715 POT SPRING RD

City State Zip Code
COCKEYSVILLE MD 21030

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

Name of Employer Occupation
JOHNS HOPKINS UNIV SURGEON

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	7	/	2	0	0	8

Transaction ID: SA11AI.9722

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MRS LORENA M JAEB

Mailing Address PO BOX 428

City State Zip Code
MANGO FL 33550

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

Name of Employer Occupation
SELF EMPLOYED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.10052

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) ►

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

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

FOR LINE NUMBER: PAGE 30 / 160
(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)
GREGORY S JOHNSON

Mailing Address 43449 ELK RUN

City State Zip Code
STEAMBOAT SPRINGS CO 80487

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2008

Transaction ID: SA11AI.11059

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MARK JOHNSTON

Mailing Address 10 RIVERWIND DR

City State Zip Code
REXFORD NY 12148

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

Name of Employer Occupation
SELF VETERINARIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2008

Transaction ID: SA11AI.9579

Amount of Each Receipt this Period
500.00

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

Mailing Address 350 E HENSCHEN ST

City State Zip Code
GARNER IA 50438

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

Name of Employer Occupation
F AND A JUMP TRUSTEES RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 27 / 2008

Transaction ID: SA11AI.10416

Amount of Each Receipt this Period
100.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 160
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

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

Mailing Address 35 ERICA LN

City BELEN State NM Zip Code 87002

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

Name of Employer SAIC Occupation SCIENTIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 06 / 16 / 2008
Transaction ID: SA11AI.11151
 Amount of Each Receipt this Period 20.00

B.

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

Mailing Address 1711 TOURS CT

City BAKERSFIELD State CA Zip Code 93311

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 06 / 13 / 2008
Transaction ID: SA11AI.11346
 Amount of Each Receipt this Period 60.00

C.

Full Name (Last, First, Middle Initial)
MR JOHN S KIRKPATRICK

Mailing Address 13874 BELLA RIVA LN

City JACKSONVILLE State FL Zip Code 32225

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

Name of Employer UNIVERSITY OF FLORIDA Occupation EDUCATOR/PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 06 / 30 / 2008
Transaction ID: SA11AI.10004
 Amount of Each Receipt this Period 500.00

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

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

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

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

FOR LINE NUMBER: PAGE 32 / 160
(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 JACK KNAPP

Mailing Address 2800 PIN OAK LN

City SANDSTON State VA Zip Code 23150

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

Name of Employer VA ASSEMBLY OF 2ND BAPTIST Occupation EX DIRECTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 25 / 2008
Transaction ID: SA11AI.9790
 Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
MR JACK KNAPP

Mailing Address 2800 PIN OAK LN

City SANDSTON State VA Zip Code 23150

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

Name of Employer VA ASSEMBLY OF 2ND BAPTIST Occupation EX DIRECTOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 06 / 30 / 2008
Transaction ID: SA11AI.9784
 Amount of Each Receipt this Period 25.00

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

Mailing Address 2717 GARFIELD AVE NW

City GRAND RAPIDS State MI Zip Code 49544

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

Name of Employer MOL BELTING COMPANY Occupation MANAGEMENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 30 / 2008
Transaction ID: SA11AI.10396
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► **575.00**

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

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

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

FOR LINE NUMBER: PAGE 33 / 160
(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 JOSEPH L KRAUSE, JR
Mailing Address PO BOX 189
City WILLCOX State AZ Zip Code 85644
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation ENGINEER AND FARMER
Receipt For: 2008
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt 06 / 25 / 2008
Transaction ID: SA11AI.11138
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
MR JOSEPH L KRAUSE, JR
Mailing Address PO BOX 189
City WILLCOX State AZ Zip Code 85644
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation ENGINEER AND FARMER
Receipt For: 2008
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 501.00
Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.11139
Amount of Each Receipt this Period 201.00

C. Full Name (Last, First, Middle Initial)
MR ROBERT LAKE
Mailing Address 2721 18TH ST
City BAKERSFIELD State CA Zip Code 93301
FEC ID number of contributing federal political committee. **C**
Name of Employer INFO REQUESTED- NOT RECD Occupation INFO REQUESTED- NOT RECD
Receipt For: 2008
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 06 / 05 / 2008
Transaction ID: SA11AI.11344
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 351.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 160
(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 LAKE

Mailing Address 2721 18TH ST

City State Zip Code
BAKERSFIELD CA 93301

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.11345

Amount of Each Receipt this Period
50.00

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

Mailing Address 6100 LAKE FORREST DR NW STE 530

City State Zip Code
ATLANTA GA 30328

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

Name of Employer Occupation
WM LEONARD & CO REAL ESTATE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.9970

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2481 BAYSHORE DR

City State Zip Code
NEWPORT BEACH CA 92663

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

Name of Employer Occupation
SELF FINANCIAL ADVISOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.11301

Amount of Each Receipt this Period
1000.00

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

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 35 / 160
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MR MARK LONGNECKER		Date of Receipt
	Mailing Address 2991 WESTSIDE DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	CHATTANOOGA	TN	37404
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10132
Name of Employer SOUTHERN CHAMPION TRAY		Occupation CFO	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 600.00	

B.	Full Name (Last, First, Middle Initial) MAJ JAMES P LUKE		Date of Receipt
	Mailing Address 4273 BRISTOL DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	DAYTON	OH	45440
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10253
Name of Employer USAF		Occupation INFO REQUESTED- NOT RECD	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 300.00	

C.	Full Name (Last, First, Middle Initial) MRS CAROLYN MATOVICH		Date of Receipt
	Mailing Address 112 PHILLIPS CT NW		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	LEESBURG	VA	20176
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9711
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 600.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 650.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 160
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MR MICHAEL E MCBRAYER	Date of Receipt MM / DD / YYYY 06 / 25 / 2008
	Mailing Address 5098 POST OAK TRITT RD NE	Transaction ID: SA11AI.9934
	City State Zip Code ROSWELL GA 30075	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation SOUTHERN DEALERS SERVICES SALES INC Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

B.	Full Name (Last, First, Middle Initial) LEE IMCCUTCHAN	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 160 CHURCHILL DR	Transaction ID: SA11AI.9972
	City State Zip Code ATLANTA GA 30350	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

C.	Full Name (Last, First, Middle Initial) LEE IMCCUTCHAN	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 160 CHURCHILL DR	Transaction ID: SA11AI.9973
	City State Zip Code ATLANTA GA 30350	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional)	6000.00
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 37 / 160
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MAE MCKINLEY		Date of Receipt	
	Mailing Address 515 11TH AVE NE		M M / D D / Y Y Y Y 06 / 13 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.10574
	MINOT	ND	58703	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		40.00	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		240.00		

B.	Full Name (Last, First, Middle Initial) MAE MCKINLEY		Date of Receipt	
	Mailing Address 515 11TH AVE NE		M M / D D / Y Y Y Y 06 / 30 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.10575
	MINOT	ND	58703	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		290.00		

C.	Full Name (Last, First, Middle Initial) MR CALVIN D MEINDERS		Date of Receipt	
	Mailing Address 1240 170TH ST		M M / D D / Y Y Y Y 06 / 30 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.10413
	PELLA	IA	50219	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		200.00	
Name of Employer VERMEER CORP		Occupation ENGINEER		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		650.00		

SUBTOTAL of Receipts This Page (optional)	▶	290.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 160

(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) KRISTIAN M MINEAU		Date of Receipt MM / DD / YYYY 06 / 30 / 2008		
	Mailing Address 10 MOUNT VERNON ST		Transaction ID: SA11AI.9482		
	City NORTH READING	State MA	Zip Code 01864	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 250.00		
Name of Employer MASSACHUSETTS FAMILY INST-ITUTE		Occupation EXECUTIVE			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) MR DON P MORGAN		Date of Receipt MM / DD / YYYY 06 / 27 / 2008		
	Mailing Address 2 SILVERBERRY		Transaction ID: SA11AI.11039		
	City LITTLETON	State CO	Zip Code 80127	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1300.00		
Name of Employer FDSC INC		Occupation SALESMAN			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) ROBERT MOUNCE		Date of Receipt MM / DD / YYYY 06 / 16 / 2008		
	Mailing Address 12615 NFAIRWOOD LN		Transaction ID: SA11AI.11563		
	City SPOKANE	State WA	Zip Code 99208	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 400.00		
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional) ▶

450.00

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

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

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

FOR LINE NUMBER: PAGE 39 / 160
(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)
JERRY NELSON

Mailing Address 8492 NORTH MAPLE COURT

City State Zip Code
ZEELAND MI 49464

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

Name of Employer
INFO REQUESTED- NOT RECD Occupation
COST ANALYST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	3	/	2	0	0	8

Transaction ID: SA11AI.10392

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MRS NORMA C NELSON

Mailing Address 1020 OAK TERRACE DR

City State Zip Code
NORTH MANKATO MN 56003

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

Name of Employer
RETIRED Occupation
RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
331.41

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	7	/	2	0	0	8

Transaction ID: SA11AI.10542

Amount of Each Receipt this Period
100.00

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

Mailing Address 555 TAXTER RD

City State Zip Code
ELMSFORD NY 10523

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.9555

Amount of Each Receipt this Period
50.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 / 160
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) JOHN NICHOLS, JR		Date of Receipt
	Mailing Address 1654 LA JOLLA RANCHO RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 23 / 2008
	City	State	Zip Code
	LA JOLLA	CA	92037
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11247
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 600.00	

B.	Full Name (Last, First, Middle Initial) MRS SUSAN P OSBORN		Date of Receipt
	Mailing Address 2541 W PALOMINO DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2008
	City	State	Zip Code
	CHANDLER	AZ	85224
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11120
Name of Employer INFO REQUESTED- NOT RECD		Occupation HOUSEWIFE & MOTHER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 750.00
		<input type="text"/> 750.00	

C.	Full Name (Last, First, Middle Initial) MR JAY R OWEN		Date of Receipt
	Mailing Address 35 CYPRESS MARSH DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 16 / 2008
	City	State	Zip Code
	HILTON HEAD ISLAND	SC	29926
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9922
Name of Employer ENGINEERED SYSTEMS		Occupation ENGINEER	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 350.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1300.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 160
(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)
BEVERLY M PADDLEFORD

Mailing Address 1440 HILLCREST DR

City LANDER State WY Zip Code 82520

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

Name of Employer: INFO REQUESTED- NOT RECD Occupation: ARTIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: 06 / 23 / 2008
Transaction ID: SA11AI.11086
 Amount of Each Receipt this Period: 250.00

B.

Full Name (Last, First, Middle Initial)
MR LINTON PARK

Mailing Address 1630 EASTLAKE CIR

City TRACY State CA Zip Code 95304

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

Name of Employer: NATIONAL SEMICONDUCTOR Occupation: ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 02 / 2008
Transaction ID: SA11AI.11395
 Amount of Each Receipt this Period: 100.00

C.

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

Mailing Address 130 S EL DORADO LN

City ANAHEIM State CA Zip Code 92807

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

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 06 / 18 / 2008
Transaction ID: SA11AI.11311
 Amount of Each Receipt this Period: 100.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 160
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

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

Mailing Address 130 S EL DORADO LN

City ANAHEIM State CA Zip Code 92807

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

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 30 / 2008
Transaction ID: SA11AI.11312
 Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
MR A KEITH PHILLIPS

Mailing Address 7713 N LUCERNE CT

City KANSAS CITY State MO Zip Code 64151

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

Name of Employer: TOWN & COUNTRY MARKETING & SVC Occupation: PRESIDENT/CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 23 / 2008
Transaction ID: SA11AI.10714
 Amount of Each Receipt this Period: 1000.00

C.

Full Name (Last, First, Middle Initial)
MR BILL POOLE

Mailing Address 1124 W SANDY RIDGE RD

City MONROE State NC Zip Code 28112

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 16 / 2008
Transaction ID: SA11AI.9864
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 1150.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 160

(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 ART PRINDLE

Mailing Address 733 BELL ST

City State Zip Code
E PALO ALTO CA 94303

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

Name of Employer Occupation
SELF GENERAL CONTRACTOR

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

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.11373

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
MR ANDREW F PUZDER

Mailing Address 570 MEADOW WOOD LN

City State Zip Code
MONTECITO CA 93108

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

Name of Employer Occupation
CKE RESTAURANTS- INC. CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.11340

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
MR RONALD L RAKER

Mailing Address 3177 PETERS MOUNTAIN RD

City State Zip Code
HALIFAX PA 17032

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

Name of Employer Occupation
UPS DOCK WORKER

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

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.9643

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 44 / 160
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial)
MS VERA R REDERBURG

Mailing Address 15312 S NORMANDIE AVE APT 220

City State Zip Code
GARDENA CA 90247

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

Name of Employer Occupation
COMFORCARE SENIOR SERV COMPANION

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 20 / 2008

Transaction ID: SA11AI.11174

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MS BETH L 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 Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 23 / 2008

Transaction ID: SA11AI.10051

Amount of Each Receipt this Period
1000.00

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

Mailing Address 421 E GREENWOOD ST

City State Zip Code
MORTON IL 61550

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

Name of Employer Occupation
SELF LAWYER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 13 / 2008

Transaction ID: SA11AI.10662

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **1325.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 160
(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 JEFFERY ROBILLARD

Mailing Address 5028 LONGVIEW CT

City State Zip Code
WEDDINGTON NC 28104

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

Name of Employer Occupation
SEATTLE SYSTEMS SALES MANAGER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.9861

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
DR SUSAN E RUTHERFORD

Mailing Address 13439 NE 115TH CT

City State Zip Code
REDMOND WA 98052

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

Name of Employer Occupation
EVERGREEN HEALTHCARE PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.11512

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR RAYMOND L SALZMAN

Mailing Address 11151 RAWHIDE RD

City State Zip Code
LUSBY MD 20657

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.9716

Amount of Each Receipt this Period
200.00

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

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

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

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

FOR LINE NUMBER: PAGE 46 / 160
(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 RAYMOND L SALZMAN

Mailing Address 11151 RAWHIDE RD

City State Zip Code
LUSBY MD 20657

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.9717

Amount of Each Receipt this Period
100.00

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

Mailing Address 344 LAZY S RANCH RD

City State Zip Code
GUNTER TX 75058

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: SA11AI.10874

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MYRA SCHLIESING

Mailing Address P O BOX 769

City State Zip Code
GLENNALLEN AK 99588

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.11565

Amount of Each Receipt this Period
100.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 160

(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 BOB SCHMIDT

Mailing Address 13714 VINERY LN

City State Zip Code
CYPRESS TX 77429

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

Name of Employer Occupation
RETIRED RETIRED

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA11AI.10962

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
MRS JOANNE M SCHROEDER

Mailing Address 15720 52ND AVE N

City State Zip Code
PLYMOUTH MN 55446

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

Name of Employer Occupation
NORTHWESTERN COLLEGE CFO

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Transaction ID: SA11AI.10538

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
MR THOMAS M SEAVER

Mailing Address 2886 EASTWOOD DR

City State Zip Code
KIMBALL MI 48074

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

Name of Employer Occupation
RETIRED RETIRED TEACHER

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA11AI.10318

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional) ▶

550.00

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 160
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

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

Mailing Address 321 VILLAGE SQUARE DR

City State Zip Code
CENTERVILLE OH 45458

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
06 / 25 / 2008

Transaction ID: SA11AI.10258

Amount of Each Receipt this Period
100.00

B.

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

Mailing Address 14806 CANTWELL BEND

City State Zip Code
CYPRESS TX 77429

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

Name of Employer Occupation
WM SHIRLEY & ASSOCIATES PRESIDENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.10964

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
MYRA SIMONS

Mailing Address 3711 ROCKDALE FELLOWSHIP RD

City State Zip Code
MOUNT JULIET TN 37122

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.10117

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) ►

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

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

FOR LINE NUMBER: PAGE 49 / 160

(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 JONATHAN SISK

Mailing Address 2048 MERCER RD

City State Zip Code
LEXINGTON KY 40511

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

Name of Employer Occupation
AUDIO AUTHORITY CORP SMALL BUSINESS OWNER

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

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.10181

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
MR RANDALL SKOV

Mailing Address 115 TALL TIMBER CT

City State Zip Code
FAYETTEVILLE GA 30215

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

Name of Employer Occupation
US AIR FORCE WEATHER OFFICER

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

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.9958

Amount of Each Receipt this Period

50.00

C.

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

Mailing Address PO BOX 203

City State Zip Code
KAAAWA HI 96730

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

Name of Employer Occupation
STATE OF HAWAII SUBSITUTE TEACHER

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

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.11426

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1150.00

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 50 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MS LONETTE SOLIS		Date of Receipt	
	Mailing Address 1909 BUCKTHORN LN		M M / D D / Y Y Y Y 06 / 16 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.9715
	RESTON	VA	20191	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer NORTHROP GRUMMAN		Occupation ADMINISTRATIVE ASSISTANT		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		300.00		

B.	Full Name (Last, First, Middle Initial) MR WAYNE SONCHAR		Date of Receipt	
	Mailing Address 491 CHRISTINE DR		M M / D D / Y Y Y Y 06 / 30 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.11165
	LAS VEGAS	NM	87701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer B.T.U		Occupation RETAIL		
Receipt For: 2008 <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) MS DIANE R SPRADLIN		Date of Receipt	
	Mailing Address 5636 ENCORE DR		M M / D D / Y Y Y Y 06 / 27 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.10898
	DALLAS	TX	75240	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer EDS FNDN		Occupation SEMI RETIRED		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		600.00		

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 160
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) MRS JAMES R STADLER		Date of Receipt
	Mailing Address 314 WALNUT DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	NASHVILLE	TN	37205
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer RETIRED		Occupation HOUSEWIFE	Transaction ID: SA11AI.10120
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 2500.00	<input type="text"/> 1000.00

B.	Full Name (Last, First, Middle Initial) MRS HELEN A STEFELY		Date of Receipt
	Mailing Address 941 S EUCLID AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	ELMHURST	IL	60126
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Transaction ID: SA11AI.10610
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 1250.00	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) MR FRED T STIMPSON		Date of Receipt
	Mailing Address 15 HILLWOOD RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	MOBILE	AL	36608
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GULF LUMBER COMPANY		Occupation PRESIDENT	Transaction ID: SA11AI.10110
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 700.00	<input type="text"/> 150.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 160
(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 RICHARD MOORE STIMPSON

Mailing Address 56 OAKLAND AVE

City MOBILE State AL Zip Code 36608

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

Name of Employer T. LEAVELL & ASSOCIATES-INC. Occupation INVESTMENT ADVISOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.10111
Amount of Each Receipt this Period 100.00

B.

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

Mailing Address PO BOX 413

City MOBILE State AL Zip Code 36601

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

Name of Employer GULF LUMBER COMPANY Occupation CFO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.10109
Amount of Each Receipt this Period 500.00

C.

Full Name (Last, First, Middle Initial)
MR DENNIS D STOVER, SR

Mailing Address 1342 RYAN RIDGE RD

City EL CAJON State CA Zip Code 92021

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.11236
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1100.00

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

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

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

FOR LINE NUMBER: PAGE 53 / 160
(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 CHARLES W STOYER

Mailing Address 5143 BEACHWALK CIR

City State Zip Code
MIRAMAR BEACH FL 32550

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.10014

Amount of Each Receipt this Period
100.00

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

Mailing Address 803 MEADOW PARK

City State Zip Code
ALLEN TX 75002

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

Name of Employer Occupation
RAYTHEON QUALITY ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	7	/	2	0	0	8

Transaction ID: SA11AI.10856

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR GEORGE EDWARD SUITER

Mailing Address 2025 LAMBERT CT

City State Zip Code
PLANO TX 75075

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.10881

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 160
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial)
MR BRIAN C SWARTZ

Mailing Address PO BOX 770162

City MEMPHIS State TN Zip Code 38177

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

Name of Employer UNEMPLOYED Occupation UNEMPLOYED SCHOOL TEACHER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 06 / 20 / 2008
Transaction ID: SA11AI.10159
 Amount of Each Receipt this Period: 80.00

B. Full Name (Last, First, Middle Initial)
MR ROBERT D SWEET, JR

Mailing Address 358 CALVARY HOLLOW RD

City ALUM BANK State PA Zip Code 15521

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

Name of Employer CP INC Occupation INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 27 / 2008
Transaction ID: SA11AI.9626
 Amount of Each Receipt this Period: 500.00

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

Mailing Address 24902 N POINT PL

City KATY State TX Zip Code 77494

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

Name of Employer AVIARA ENERGY CORPORATION Occupation ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 05 / 2008
Transaction ID: SA11AI.10968
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► **630.00**

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 55 / 160
	<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 D TEISMAN		Date of Receipt MM / DD / YYYY 06 / 30 / 2008		
	Mailing Address 3423 FIELDSTONE CT		Transaction ID: SA11AI.10388		
	City HUDSONVILLE	State MI	Zip Code 49426	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer REQUEST FOODS	Occupation HUMAN RESOURCES			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

B.	Full Name (Last, First, Middle Initial) MR RON TENNY		Date of Receipt MM / DD / YYYY 06 / 27 / 2008		
	Mailing Address 100 ROCKINGTON DR		Transaction ID: SA11AI.9961		
	City TYRONE	State GA	Zip Code 30290	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer OPERATION MOBILIZATION	Occupation RETIRED COMPUTER PROGRAMMER			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1400.00			

C.	Full Name (Last, First, Middle Initial) MR DONALD J TEODORO		Date of Receipt MM / DD / YYYY 06 / 23 / 2008		
	Mailing Address 3008 E BAY DR NW		Transaction ID: SA11AI.11525		
	City GIG HARBOR	State WA	Zip Code 98335	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AUTOMATED SYSTEMS OF TACO- MA	Occupation CHIEF ENGINEER			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

SUBTOTAL of Receipts This Page (optional)	▶	2100.00
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 56 / 160
	<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 ELOISE W TERRY

Mailing Address 2825 BLOOMFIELD RD # 14

City State Zip Code
CPE GIRARDEAU MO 63703

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.10707

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
J MICHAEL THOMPSON

Mailing Address 24213 OAK LN

City State Zip Code
MATTAWAN MI 49071

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

Name of Employer Occupation
OPPENHEIMER & CO. RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.10367

Amount of Each Receipt this Period
100.00

C.

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

Mailing Address 1444 BETHEL CHURCH RD

City State Zip Code
ELKTON VA 22827

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

Name of Employer Occupation
ROCKINGHAM MEMORIAL HOSPITAL PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2330.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.9774

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 160
(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 KAYE K TOMPSON

Mailing Address 9400 PEBBLE BEACH DR NE

City State Zip Code
ALBUQUERQUE NM 87111

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.11154

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MS CAROLE TOWNSEND

Mailing Address 30 LONE PINE WAY

City State Zip Code
COLORADO SPRINGS CO 80919

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

Name of Employer Occupation
CHAPEL HILLS ORTHODONTIC CENTER BOOKKEEPER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.11081

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR JOHN TRUELSON

Mailing Address 3108 CARUTH BLVD

City State Zip Code
DALLAS TX 75225

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

Name of Employer Occupation
SELF SURGEON

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.10893

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **2350.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 160
	<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 GENE P VINEYARD		Date of Receipt	
	Mailing Address 322 COUNTRY LN		M M / D D / Y Y Y Y 06 / 16 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.9949
	CARROLLTON	GA	30117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer CONCRETE CAREERS.COM		Occupation RECRUITER		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00		

B.	Full Name (Last, First, Middle Initial) MR GENE P VINEYARD		Date of Receipt	
	Mailing Address 322 COUNTRY LN		M M / D D / Y Y Y Y 06 / 27 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.9946
	CARROLLTON	GA	30117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		10.00	
Name of Employer CONCRETE CAREERS.COM		Occupation RECRUITER		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 215.00		

C.	Full Name (Last, First, Middle Initial) MRS SYLVIA WADE		Date of Receipt	
	Mailing Address 432 ELLISON RD		M M / D D / Y Y Y Y 06 / 30 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.9963
	TYRONE	GA	30290	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer HOUSEWIFE		Occupation HOUSEWIFE		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	▶	535.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 160
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial)
MR JAMES 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: INFO REQUESTED- NOT RECD Occupation: INFO REQUESTED- NOT RECD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 27 / 2008
Transaction ID: SA11AI.11142
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MR WALTER WELD

Mailing Address 29 MAIN ST

City DOVER State MA Zip Code 02030

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 23 / 2008
Transaction ID: SA11AI.9484
 Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
MRS DONALD A WHITE, JR

Mailing Address 9412 ROCKY HILLS DR

City CORDOVA State TN Zip Code 38018

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

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 06 / 18 / 2008
Transaction ID: SA11AI.10156
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 1150.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 160
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)
MR KEITH M WHITE

Mailing Address 15 OAK PL

City State Zip Code
NEW IBERIA LA 70563

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

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

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.10795

Amount of Each Receipt this Period
2500.00

B.

Full Name (Last, First, Middle Initial)
MR JOHN D WHITLOCK

Mailing Address 8720 RIVER RD

City State Zip Code
RICHMOND VA 23229

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

Name of Employer Occupation
THE WHITLOCK GROUP CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.9794

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
MRS IRENE MA WONG

Mailing Address 711 NOME AVE

City State Zip Code
MODESTO CA 95350

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

Name of Employer Occupation
SUTTER GOULD MEDICAL FNDN MEDICAL TECHNOLOGIST

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
06 / 27 / 2008

Transaction ID: SA11AI.11396

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **3800.00**

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

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

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

FOR LINE NUMBER: PAGE 61 / 160
(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)
MARGARET YELVERTON

Mailing Address 26 MYRTLE ISLAND CIR

City State Zip Code
BLUFFTON SC 29910

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

Name of Employer CRESCENT RESOURCES Occupation REAL ESTATE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.9921

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City State Zip Code
MORTON IL 61550

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.10664

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MRS JUNE L ZEIGLER

Mailing Address 2261 WARREN DR

City State Zip Code
MORRISTOWN TN 37814

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.10142

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **575.00**

TOTAL This Period (last page this line number only) ► **79441.00**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 62 / 160	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial) BB& T Bank		Date of Receipt
Mailing Address 2700 S. Quincy Street		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
City	State	Zip Code
Arlington	VA	22206
FEC ID number of contributing federal political committee.		Transaction ID: SA17.11568
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="1072.22"/>
Occupation		INTEREST INCOME
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="7516.69"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1072.22"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1072.22"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) Access Bank	Transaction ID: SB21B.11605 Date of Disbursement
	Mailing Address 14006 Lee Jackson Memorial Hwy	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Chantilly State VA Zip Code 20151	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PROCESSING FEES	<input type="text" value="748.33"/>
	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) ADVANCED DIGITAL SOLUTIONS	Transaction ID: SB21B.11583 Date of Disbursement
	Mailing Address 10680 MAIN STREET	<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement COMPUTER SERVICES	<input type="text" value="1215.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.11606 Date of Disbursement
	Mailing Address P.O. Box 981540	<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City El Paso State TX Zip Code 79998	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PROCESSING FEES	<input type="text" value="0.81"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1964.14"/>
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

<p>A. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 981540</p> <p>City El Paso State TX Zip Code 79998</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.11607</p> <p>Date of Disbursement 06 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 3.25</p>
<p>B. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 981540</p> <p>City El Paso State TX Zip Code 79998</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.11608</p> <p>Date of Disbursement 06 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 3.25</p>
<p>C. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 981540</p> <p>City El Paso State TX Zip Code 79998</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.11609</p> <p>Date of Disbursement 06 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 0.98</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7.48

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 65 / 160

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.11610 Date of Disbursement
	Mailing Address P.O. Box 981540	<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City El Paso State TX Zip Code 79998	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PROCESSING FEES	<input type="text" value="47.94"/>
	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) American Express	Transaction ID: SB21B.11611 Date of Disbursement
	Mailing Address P.O. Box 981540	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City El Paso State TX Zip Code 79998	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PROCESSING FEES	<input type="text" value="378.95"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GARY BAUER	Transaction ID: SB21B.11587 Date of Disbursement
	Mailing Address 2800 SHIRLINGTON ROAD #930	<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement CONSULTING - PAC POLITICAL FUNDRAISING	<input type="text" value="4500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4926.89"/>
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) BB& T Bank	Transaction ID: SB21B.11601 Date of Disbursement																			
	Mailing Address 2700 S. Quincy Street	<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>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	0	8												
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period																			
	Purpose of Disbursement BANK FEES	<table border="1"><tr><td>101.71</td></tr></table>	101.71																		
101.71																					
	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) BB& T Bank	Transaction ID: SB21B.11602 Date of Disbursement																			
	Mailing Address 2700 S. Quincy Street	<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>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	0	8												
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period																			
	Purpose of Disbursement BANK FEES	<table border="1"><tr><td>15.00</td></tr></table>	15.00																		
15.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) CHOI COMPANIES	Transaction ID: SB21B.11585 Date of Disbursement																			
	Mailing Address 5999 STEVENSON AVE #310	<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>6</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	7		2	0	0	8												
	City ALEXANDRIA State VA Zip Code 22304	Amount of Each Disbursement this Period																			
	Purpose of Disbursement RENT	<table border="1"><tr><td>2536.02</td></tr></table>	2536.02																		
2536.02																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>2652.73</td></tr></table>	2652.73
2652.73		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) LEXIS NEXIS Mailing Address P.O. BOX 7247-7090 City PHILADELPHIA State PA Zip Code 19170 Purpose of Disbursement DUES AND SUBSCRIPTIONS 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.11575 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 8	Amount of Each Disbursement this Period 350.00
B.	Full Name (Last, First, Middle Initial) LPS Mailing Address P.O. BOX 2325 City FAIRFAX State VA Zip Code 22031 Purpose of Disbursement PAC - DATA PROCESSING 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.11576 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 8	Amount of Each Disbursement this Period 620.49
C.	Full Name (Last, First, Middle Initial) LPS Mailing Address P.O. BOX 2325 City FAIRFAX State VA Zip Code 22031 Purpose of Disbursement PAC - DATA PROCESSING SERVICES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.11588 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 8	Amount of Each Disbursement this Period 963.13

SUBTOTAL of Disbursements This Page (optional)	1933.62
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) BILL MOELLER	Transaction ID: SB21B.11584 Date of Disbursement 06 / 27 / 2008	
	Mailing Address 2800 SHIRLINGTON ROAD #930		
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period	1250.00
	Purpose of Disbursement CONSULTING - POLITICAL RESEARCHER/WRITER		
	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) BILL MOELLER	Transaction ID: SB21B.11596 Date of Disbursement 06 / 27 / 2008	
	Mailing Address 2800 SHIRLINGTON ROAD #930		
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period	21.57
	Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		
	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) NATIONAL JOURNAL	Transaction ID: SB21B.11589 Date of Disbursement 06 / 27 / 2008	
	Mailing Address 600 NEW HAMPSHIRE NW		
	City WASHINGTON State DC Zip Code 20037	Amount of Each Disbursement this Period	1661.50
	Purpose of Disbursement DUES AND SUBSCRIPTIONS		
	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) ▶	2933.07
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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) RESOLUTION GRAPHICS</p> <p>Mailing Address 3725 DUNLAP STREET N</p> <p>City ARDEN HILLS State MN Zip Code 55112</p> <p>Purpose of Disbursement PAC - DIRECT MAIL PRODUCTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.11592</p> <p>Date of Disbursement 06 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 2810.68</p>
<p>B. Full Name (Last, First, Middle Initial) CATHERINE SNOW</p> <p>Mailing Address 2800 SHIRLINGTON ROAD #930</p> <p>City ARLINGTON State VA Zip Code 22206</p> <p>Purpose of Disbursement PAC - MEETING EXPENSE REIMBURSEMENT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.11598</p> <p>Date of Disbursement 06 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 229.33</p>
<p>C. Full Name (Last, First, Middle Initial) THE MAIL HAUS</p> <p>Mailing Address 1709 SUBURBAN DRIVE</p> <p>City DEPERE State WI Zip Code 54115</p> <p>Purpose of Disbursement PAC - DIRECT MAIL PRODUCTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.11622</p> <p>Date of Disbursement 06 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 1888.64</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4928.65

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) U.S. POSTMASTER	Transaction ID: SB21B.11603 Date of Disbursement MM / DD / YYYY 06 / 06 / 2008
	Mailing Address MAIN POST OFFICE	Amount of Each Disbursement this Period 500.00
	City WASHINGTON	State DC
	Zip Code 20000	
	Purpose of Disbursement PAC - BRE POSTAGE	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) U.S. POSTMASTER	Transaction ID: SB21B.11604 Date of Disbursement MM / DD / YYYY 06 / 27 / 2008
	Mailing Address MAIN POST OFFICE	Amount of Each Disbursement this Period 500.00
	City WASHINGTON	State DC
	Zip Code 20000	
	Purpose of Disbursement PAC - BRE POSTAGE	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) Dorie Velezis	Transaction ID: SB21B.11586 Date of Disbursement MM / DD / YYYY 06 / 27 / 2008
	Mailing Address 2800 S. Shirlington Road, #930	Amount of Each Disbursement this Period 1125.00
	City Arlington	State VA
	Zip Code 22206	
	Purpose of Disbursement ACCOUNTING 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)	▶	2125.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A.	Full Name (Last, First, Middle Initial) VERIZON	Transaction ID: SB21B.11594
	Mailing Address P.O. BOX 17577	Date of Disbursement 06 / 27 / 2008
	City BALTIMORE State MD Zip Code 21297	Amount of Each Disbursement this Period 439.76
	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.11571
	Mailing Address 14039 WESTWIND LANE	Date of Disbursement 06 / 09 / 2008
	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.11595
	Mailing Address 4128 PEPSI PLACE	Date of Disbursement 06 / 27 / 2008
	City CHANTILLY State VA Zip Code 20151	Amount of Each Disbursement this Period 2207.60
	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)	3147.36
TOTAL This Period (last page this line number only)	27911.51

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 74 / 160
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor INTEGRAM	Nature of Debt (Purpose): PAC - DIRECT MAIL PRODUCT- ION
Mailing Address 8421 HILLTOP ROAD	
City State ZIP Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.11623	
Amount Incurred This Period 2549.66	Payment This Period 2549.66	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor INTEGRAM	Nature of Debt (Purpose): PAC - DIRECT MAIL PRODUCT- ION
Mailing Address 8421 HILLTOP ROAD	
City State ZIP Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.11624	
Amount Incurred This Period 3026.14	Payment This Period 0.00	Outstanding Balance at Close of This Period 3026.14

1) SUBTOTALS This Period This Page (optional).....	▶	3249.25
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 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 2320.90		Transaction ID: SD10.4696	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2320.90	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LUKENS COMPANY			Nature of Debt (Purpose): PAC - DIRECT MAIL CONSULT- ING
Mailing Address 2800 SHIRLINGTON ROAD #900			
City ARLINGTON	State VA	ZIP Code 22206	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.11612	
Amount Incurred This Period 2600.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2600.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LUKENS COMPANY			Nature of Debt (Purpose): PAC - DIRECT MAIL CONSULT- ING
Mailing Address 2800 SHIRLINGTON ROAD #900			
City ARLINGTON	State VA	ZIP Code 22206	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.11614	
Amount Incurred This Period 2000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00	

1) SUBTOTALS This Period This Page (optional).....	6920.90
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 76 / 160
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE MAIL HAUS	Nature of Debt (Purpose): PAC - DIRECT MAIL PRODUCT- ION
Mailing Address 1709 SUBURBAN DRIVE	
City DEPERE State WI ZIP Code 54115	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.11621	
Amount Incurred This Period 1888.64	Payment This Period 1888.64	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE MAIL HAUS	Nature of Debt (Purpose): PAC - DIRECT MAIL PRODUCT- ION
Mailing Address 1709 SUBURBAN DRIVE	
City DEPERE State WI ZIP Code 54115	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.11617	
Amount Incurred This Period 4321.74	Payment This Period 0.00	Outstanding Balance at Close of This Period 4321.74

1) SUBTOTALS This Period This Page (optional).....	4321.74
2) TOTALS This Period (last page this line number only).....	14491.89
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)	14491.89

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