

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 C00325076 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12G) (d) 30-Day Post -Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 01 01 2008 through 01 31 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 02 20 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.

Table with 7 columns and 1 row for Office Use Only

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Campaign for Working Families

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	1

D	D
3	1

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	1339727.01									
(c) Total Receipts (from Line 19)	36953.76	36953.76								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1376680.77	1376680.77								
7. Total Disbursements (from Line 31)	42853.29	42853.29								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1333827.48	1333827.48								
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)	3394.01									

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	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	1

D	D
3	1

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	23025.00	23025.00
(i) Itemized (use Schedule A)	11616.87	11616.87
(ii) Unitemized	34641.87	34641.87
(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)	34641.87	34641.87
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)	234.83	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.)	2077.06	2077.06
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))	36953.76	36953.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	36953.76	36953.76

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.....	42853.29	42853.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	42853.29	42853.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	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))..	42853.29	42853.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	42853.29	42853.29

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)	34641.87	34641.87
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34641.87	34641.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	42853.29	42853.29
37. Offsets to Operating Expenditures (from Line 15, page 3)	234.83	234.83
38. Net Operating Expenditures (subtract Line 37 from Line 36)	42618.46	42618.46

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

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

FOR LINE NUMBER: PAGE 6 / 38

(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 JOHN D BAER

Mailing Address 15739 TOEPFER ST

City State Zip Code
TREMONT IL 61568

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

Name of Employer Occupation
TREMONT MEDICAL CLINIC FAMILY PHYSICIAN

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1200.00

Date of Receipt

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

Transaction ID: SA11AI.83970

Amount of Each Receipt this Period

1200.00

B.

Full Name (Last, First, Middle Initial)
MS ANGELINE BOERSMA

Mailing Address 2634 NE 6TH ST

City State Zip Code
GRESHAM OR 97030

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

Name of Employer Occupation
RETIRED RET

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	1		2	8		2	0	0	8

Transaction ID: SA11AI.84101

Amount of Each Receipt this Period

300.00

C.

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

Mailing Address 27001 HWY 128

City State Zip Code
YORKVILLE CA 95494

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

Name of Employer Occupation
JAYMES & JAYMES INSURANCE BROKER

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	1		2	4		2	0	0	8

Transaction ID: SA11AI.84093

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) ►

2500.00

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 / 38
	<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 JOHN W FRACK		Date of Receipt
	Mailing Address 11143 PHILADELPHIA 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
	WHITE MARSH	MD	21162
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.83807
Name of Employer NORTHROP GRUMMAN		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"/> 500.00

B.	Full Name (Last, First, Middle Initial) MRS JAMES L FULLMER		Date of Receipt
	Mailing Address 2552 WALNUT AVE SUITE 230		<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
	TUSTIN	CA	92780
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.84072
Name of Employer LASER & DERMATOLOGY GROUP		Occupation RN	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

C.	Full Name (Last, First, Middle Initial) MRS JOAN FULLMER		Date of Receipt
	Mailing Address 2552 WALNUT AVE SUITE 230		<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
	TUSTIN	CA	92780
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.84183
Name of Employer LASER & DERMATOLOGY GROUP		Occupation RN	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

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: (check only one)	PAGE 8 / 38
	<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)
MRS E MAXINE HARWARD

Mailing Address 277 NE CONIFER #136

City State Zip Code
CORVALLIS OR 97330

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

Name of Employer RETIRED Occupation RETRIED

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 1 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.84109

Amount of Each Receipt this Period
300.00

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

Mailing Address 61 EAST MEADOW RD

City State Zip Code
WILTON CT 06897

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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.83781

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
MR WILLIAM T HENRY, SR

Mailing Address 61 SOLOGUE CIR

City State Zip Code
LITTLE ROCK AR 72223

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

Name of Employer RADIOLOGY CONSULTANTS Occupation INFO REQUESTED- NOT RECD

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 1 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.83990

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► 2600.00

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 9 / 38
(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)
THEODORE G HINES

Mailing Address 434 E WASHINGTON BLVD

City State Zip Code
GROVE CITY PA 16127

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

Name of Employer Occupation
PINE INSTRUMENT CO EXECUTIVE

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 1 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.83795

Amount of Each Receipt this Period
350.00

B.

Full Name (Last, First, Middle Initial)
MR KENNETH R JINKERSON

Mailing Address 315 CORAL SKY LN

City State Zip Code
EL PASO TX 79912

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

Name of Employer Occupation
WESTERN ENGINEER

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 1 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.84030

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
MR LEONARD F KLASSEN

Mailing Address 1418 DENVER

City State Zip Code
MARION KS 66861

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 ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.83980

Amount of Each Receipt this Period
250.00

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

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

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

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

FOR LINE NUMBER: PAGE 10 / 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
MRS NANCY KLINE
Mailing Address 490 N 500 E
City GREENFIELD State IN Zip Code 46140
FEC ID number of contributing federal political committee. **C**
Name of Employer ELI LILLY Occupation INFO REQUESTED- NOT RECD
Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 01 / 28 / 2008
Transaction ID: SA11AI.83884
Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
MRS MERRY C LARKIN
Mailing Address 259 N WATERTOWN ST
City WAUPUN State WI Zip Code 53963
FEC ID number of contributing federal political committee. **C**
Name of Employer POWERCOM CORPORATION Occupation EXECUTIVE
Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 01 / 14 / 2008
Transaction ID: SA11AI.83933
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
MR ELIOT K NYMEYER
Mailing Address 25508 S KLEMME RD
City CRETE State IL Zip Code 60417
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 ▼ 400.00
Date of Receipt 01 / 28 / 2008
Transaction ID: SA11AI.83959
Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional) ► 1700.00
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 11 / 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
KENNETH H ORUME

Mailing Address 11432 ARROYO

City State Zip Code
LEMON HEIGHTS CA 92705

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 ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.84069

Amount of Each Receipt this Period
375.00

B. Full Name (Last, First, Middle Initial)
MR BRIAN R PARKER

Mailing Address 2514 MEADOW DR

City State Zip Code
ZEELAND MI 49464

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

Name of Employer
DONNELLY CORP

Occupation
ENGINEER

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.83918

Amount of Each Receipt this Period
320.00

C. Full Name (Last, First, Middle Initial)
MR A KEITH PHILIPS

Mailing Address 7713 N LUCERNE COURT

City State Zip Code
KANSAS CITY MO 64151

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 1 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.83977

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1695.00**

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 12 / 38
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Campaign for Working Families

A.	Full Name (Last, First, Middle Initial) MR MICHAEL D RISINGER		Date of Receipt	
	Mailing Address 421 E GREENWOOD ST		M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.83965
	MORTON	IL	61550	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer SELF		Occupation LAWYER		
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 MICHAEL D RISINGER		Date of Receipt	
	Mailing Address 421 E GREENWOOD ST		M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.83966
	MORTON	IL	61550	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer SELF		Occupation LAWYER		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		600.00		

C.	Full Name (Last, First, Middle Initial) MR JEFFERY ROBILLARD		Date of Receipt	
	Mailing Address 5028 LONG VIEW COURT		M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.83821
	WEDDINGTON	NC	28104	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer SEATTLE SYSTEMS		Occupation SALES MANAGER		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

SUBTOTAL of Receipts This Page (optional)	▶	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 / 38
(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)
HELEN A STEFELY

Mailing Address 941 EUCLID AVENUE

City State Zip Code
ELMHURST IL 60126

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
0 1 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.83955

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
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 ▼
330.00

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

Transaction ID: SA11AI.83815

Amount of Each Receipt this Period
330.00

C.

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

Mailing Address 510 ROLLING WAY

City State Zip Code
SIGNAL MOUNTAIN TN 37377

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

Name of Employer Occupation
SOUTHERN CHAMPION TRAY CO CHAIRMAN OF THE BOARD

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 1 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.83859

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	2330.00
TOTAL This Period (last page this line number only)	▶	23025.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 14 / 38	
	(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 checked="" 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)
US POSTMASTER

Mailing Address Main Post Office

City State Zip Code
Washington DC 20000

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.83

Date of Receipt

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

Transaction ID: SA15.84182

Amount of Each Receipt this Period
234.83

REFUND BRE FEES

SUBTOTAL of Receipts This Page (optional)	▶	234.83
TOTAL This Period (last page this line number only)	▶	234.83

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 15 / 38	
	(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

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) BB&T		Date of Receipt
Mailing Address P.O. Box 580363		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
City	State	Zip Code
Charlotte	NC	28258
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: SA17.84180
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2077.06"/>
	<input type="text" value="2077.06"/>	INTEREST INCOME

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2077.06"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2077.06"/>

**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 16 / 38

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

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

NAME OF COMMITTEE (In Full)
Campaign for Working Families

A.	Full Name (Last, First, Middle Initial) ACCESS BANK Mailing Address 1800 ROBERT FULTON DRIVE City RESTON State VA Zip Code 20191 Purpose of Disbursement BANK FEES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.84130 Date of Disbursement 01 / 03 / 2008 Amount of Each Disbursement this Period 314.45
B.	Full Name (Last, First, Middle Initial) Gary Bauer Mailing Address 2800 Shirlington Road City Arlington State VA Zip Code 22206 Purpose of Disbursement CONSULTING - PAC FUNDRAISING 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.84173 Date of Disbursement 01 / 29 / 2008 Amount of Each Disbursement this Period 5000.00
C.	Full Name (Last, First, Middle Initial) BB&T Mailing Address P.O. Box 580363 City Charlotte State NC Zip Code 28258 Purpose of Disbursement CREDIT CARD PROCESSING FEES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.84135 Date of Disbursement 01 / 08 / 2008 Amount of Each Disbursement this Period 336.91

SUBTOTAL of Disbursements This Page (optional) ▶	5651.36
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

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) BB&T <hr/> Mailing Address P.O. Box 580363 <hr/> City Charlotte State NC Zip Code 28258 <hr/> Purpose of Disbursement Bank Service Charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.84126 Date of Disbursement 01 / 31 / 2008 <hr/> Amount of Each Disbursement this Period 109.03
B.	Full Name (Last, First, Middle Initial) COVINGTON & BURLING <hr/> Mailing Address 1201 Pennsylvania Ave., NW <hr/> City Washington State DC Zip Code 20044 <hr/> Purpose of Disbursement LEGAL FEES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.84147 Date of Disbursement 01 / 04 / 2008 <hr/> Amount of Each Disbursement this Period 673.00
C.	Full Name (Last, First, Middle Initial) DESIGN 4 INC. <hr/> Mailing Address 2020 W. Bandon Blvd. Suite 202 <hr/> City Brandon State FL Zip Code 33511 <hr/> Purpose of Disbursement PAC - PRINTING AND PRODUCTION Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.84148 Date of Disbursement 01 / 04 / 2008 <hr/> Amount of Each Disbursement this Period 2915.00

SUBTOTAL of Disbursements This Page (optional) ▶	3697.03
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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) LEXIS NEXIS	Transaction ID: SB21B.84159
	Mailing Address P.O. Box 7247-7090	Date of Disbursement 01 / 15 / 2008
	City Philadelphia State PA Zip Code 19170	Amount of Each Disbursement this Period 350.00
	Purpose of Disbursement DUES AND SUBSCRIPTIONS	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) LPS	Transaction ID: SB21B.84149
	Mailing Address P.O. BOX 2325	Date of Disbursement 01 / 04 / 2008
	City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period 401.04
	Purpose of Disbursement PAC - DATA PROCESSING	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) LPS	Transaction ID: SB21B.84160
	Mailing Address P.O. BOX 2325	Date of Disbursement 01 / 15 / 2008
	City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period 311.38
	Purpose of Disbursement PAC - DATA PROCESSING	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)	▶	1062.42
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 19 / 38

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

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

NAME OF COMMITTEE (In Full)
Campaign for Working Families

A.	Full Name (Last, First, Middle Initial) LPS	Transaction ID: SB21B.84177 Date of Disbursement 01 / 29 / 2008
	Mailing Address P.O. BOX 2325	Amount of Each Disbursement this Period 406.15
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement PAC - DATA PROCESSING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) MCINTIRE GENERAL CONTRATORS	Transaction ID: SB21B.84152 Date of Disbursement 01 / 09 / 2008
	Mailing Address 3476 MANASSAS CT	Amount of Each Disbursement this Period 285.00
	City DAVIDSONVILLE State MD Zip Code 21035	
	Purpose of Disbursement DISPOSE OF BROKEN OFFICE EQUIP	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) MGP Shirlington Gateway	Transaction ID: SB21B.84144 Date of Disbursement 01 / 04 / 2008
	Mailing Address P.O. Box 201630	Amount of Each Disbursement this Period 2510.05
	City Dallas State TX Zip Code 75320	
	Purpose of Disbursement RENT	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	3201.20
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

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) NATIONAL JOURNAL	Transaction ID: SB21B.84161 Date of Disbursement
	Mailing Address 1501 M Street, NW	<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DUES AND SUBSCRIPTIONS	<input type="text" value="1645.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) PMC	Transaction ID: SB21B.84158 Date of Disbursement
	Mailing Address 7201 Lockport Place	<input type="text" value="01"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City Lorton State VA Zip Code 22079	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC - PRINTING AND PRODUCTION	<input type="text" value="3385.44"/>
	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) PMC	Transaction ID: SB21B.84172 Date of Disbursement
	Mailing Address 7201 Lockport Place	<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City Lorton State VA Zip Code 22079	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC - DIRECT MAIL PRODUCTION	<input type="text" value="2092.87"/>
	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="7123.31"/>
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

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) RST Marketing	Transaction ID: SB21B.84157 Date of Disbursement
	Mailing Address P.O. Box 228	<input type="text" value="01"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City Forest State VA Zip Code 24551	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC - DIRECT MAIL PRODUCTION	<input type="text" value="7580.14"/>
	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) CATHERINE SNOW	Transaction ID: SB21B.84168 Date of Disbursement
	Mailing Address 2800 SHIRLINGTON RD #930	<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC - MEETING EXPENSE	<input type="text" value="1064.35"/>
	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) THE LUKENS COMPANY'	Transaction ID: SB21B.84166 Date of Disbursement
	Mailing Address 2800 Shirlington Road 9th Floor	<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC - DIRECT MAIL CONSULTING	<input type="text" value="2600.00"/>
	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="11244.49"/>
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

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) US POSTMASTER	Transaction ID: SB21B.84142 Date of Disbursement
	Mailing Address Main Post Office	<input type="text" value="01"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20000	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC - REPLENISH BRE ACCOUNT	<input type="text" value="800.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) US POSTMASTER	Transaction ID: SB21B.84143 Date of Disbursement
	Mailing Address Main Post Office	<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20000	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC - ANNUAL BOX AND PERMIT FEES	<input type="text" value="970.00"/>
	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) Dorie Velezis	Transaction ID: SB21B.84171 Date of Disbursement
	Mailing Address 2800 Shirlington Road #930	<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement ACCOUNTING SERVICES	<input type="text" value="1250.00"/>
	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="3020.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 38

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

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

NAME OF COMMITTEE (In Full)
Campaign for Working Families

<p>A. Full Name (Last, First, Middle Initial) VERIZON</p> <p>Mailing Address P.O. Box 17577</p> <p>City Baltimore State MD Zip Code 21297</p> <p>Purpose of Disbursement TELEPHONE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.84164</p> <p>Date of Disbursement 01 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 412.88</p>
<p>B. Full Name (Last, First, Middle Initial) Dean Virag</p> <p>Mailing Address 14039 Westwind Lane</p> <p>City Culpeper State VA Zip Code 22701</p> <p>Purpose of Disbursement COMPUTER SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.84154</p> <p>Date of Disbursement 01 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>C. Full Name (Last, First, Middle Initial) WASHINGTON INTELLIGENCE BUREAU</p> <p>Mailing Address 4128 PEPSI PLACE</p> <p>City CHANTILLY State VA Zip Code 20151</p> <p>Purpose of Disbursement PAC - CAGING AND DATA ENTRY</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.84178</p> <p>Date of Disbursement 01 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 2026.30</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2939.18

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

42095.56

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 DIRECTECH, INC	Nature of Debt (Purpose): Caging & Data Processing
Mailing Address 8595 Grovemont Circle	
City Gaithersburg State MD ZIP Code 20877	

Outstanding Balance Beginning This Period 223.11	Transaction ID: SD10.42032	
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 MWM Direct Marketing Services	Nature of Debt (Purpose): Direct Mail
Mailing Address 8048 Hillrise Court	
City Elkridge State MD ZIP Code 21075	

Outstanding Balance Beginning This Period 2320.90	Transaction ID: SD10.15344	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2320.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RST Marketing	Nature of Debt (Purpose): PAC - Direct Mail Product- ion
Mailing Address P.O. Box 228	
City Forest State VA ZIP Code 24551	

Outstanding Balance Beginning This Period 7580.14	Transaction ID: SD10.80257	
Amount Incurred This Period 0.00	Payment This Period 7580.14	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	2544.01
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 THE LUKENS COMPANY ¹			Nature of Debt (Purpose): PAC - Direct Mail Consulting
Mailing Address 2800 Shirlington Road 9th Floor			
City	State	ZIP Code	
Arlington	VA	22206	

Outstanding Balance Beginning This Period		Transaction ID: SD10.80253	
2600.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	2600.00	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LUKENS COMPANY ¹			Nature of Debt (Purpose): PAC - DIRECT MAIL CONSULTING
Mailing Address 2800 Shirlington Road 9th Floor			
City	State	ZIP Code	
Arlington	VA	22206	

Outstanding Balance Beginning This Period		Transaction ID: SD10.84181	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
850.00	0.00	850.00	

1) SUBTOTALS This Period This Page (optional).....	850.00
2) TOTALS This Period (last page this line number only).....	3394.01
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)	3394.01

Image# 28990487930

Form/Schedule: **SA11AI** 0100058-0000173

Transaction ID: **SA11AI.83970**

Form/Schedule: **SA11AI** 0009860-0000286

Transaction ID: **SA11AI.84101**

Image# 28990487931

Form/Schedule: **SA11AI** 0101847-0000279

Transaction ID: **SA11AI.84093**

Form/Schedule: **SA11AI** 0002519-0000034

Transaction ID: **SA11AI.83807**

Image# 28990487932

Form/Schedule: **SA11AI** 0104118-0000261

Transaction ID: **SA11AI.84072**

Form/Schedule: **SA11AI** 0101068-0000292

Transaction ID: **SA11AI.84109**

Image# 28990487933

Form/Schedule: **SA11AI** 0104904-0000010

Transaction ID: **SA11AI.83781**

Form/Schedule: **SA11AI** 0007401-0000191

Transaction ID: **SA11AI.83990**

Image# 28990487934

Form/Schedule: **SA11AI** 0033409-0000021

Transaction ID: **SA11AI.83795**

Form/Schedule: **SA11AI** 0004098-0000225

Transaction ID: **SA11AI.84030**

Image# 28990487935

Form/Schedule: **SA11AI** 0001187-0000183

Transaction ID: **SA11AI.83980**

Form/Schedule: **SA11AI** 0004819-0000098

Transaction ID: **SA11AI.83884**

Image# 28990487936

Form/Schedule: **SA11AI** 0099488-0000138

Transaction ID: **SA11AI.83933**

Form/Schedule: **SA11AI** 0100072-0000162

Transaction ID: **SA11AI.83959**

Image# 28990487937

Form/Schedule: **SA11AI** 0104899-0000258

Transaction ID: **SA11AI.84069**

Form/Schedule: **SA11AI** 0021018-0000123

Transaction ID: **SA11AI.83918**

Image# 28990487938

Form/Schedule: **SA11AI** 0104901-0000179

Transaction ID: **SA11AI.83977**

Form/Schedule: **SA11AI** 0103251-0000167

Transaction ID: **SA11AI.83965**

Image# 28990487939

Form/Schedule: **SA11AI** 0103251-0000168

Transaction ID: **SA11AI.83966**

Form/Schedule: **SA11AI** 0103053-0000046

Transaction ID: **SA11AI.83821**

Image# 28990487940

Form/Schedule: **SA11AI** 0006449-0000159

Transaction ID: **SA11AI.83955**

Form/Schedule: **SA11AI** 0002694-0000041

Transaction ID: **SA11AI.83815**

Image# 28990487941

Form/Schedule: **SA11AI** 0097422-0000077

Transaction ID: **SA11AI.83859**
