PAGE 1 / 11

## **FEC** FORM 3X

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

	or Other Than An Aut	norized Committee	Office Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Committee for Working	g Families, sponsore	d by the California La	bor Federation, AFL-CIO
ADDRESS (number and street)	555 Capitol Mall, Suite 1425	5	
▼ Check if different			
than previously reported. (ACC)	Sacramento		CA 95814
2. FEC IDENTIFICATION NU	JMBER ▼ CI	ГУ▲	STATE ▲ ZIP CODE ▲
C C00626119		S THIS NEW (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20	(Non-Election Year Only)
(a) Quarterly Reports:			(Non-Election Year Only)
April 15 Quarterly Report (C		20 (M4) Jul 20 (M	M7) Oct 20 (M10) Jan 31 (YE)
July 15	(C) 12-Day	Primary (12P)	General (12G) Runoff (12R)
Quarterly Report (C October 15	Report for the:	Convention (12C)	Special (12S)
Quarterly Report (C  January 31  Year-End Report (Y		on on	in the State of
July 31 Mid-Year Report (Non-electio Year Only) (MY)	n (d) 30-Day POST-Election	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Report for the:	on on	in the State of
5. Covering Period 01	01 2017		06 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined th	is Report and to the best of	my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasure	Pulaski, Art, , , r		
Signature of Treasurer Pulas	rki, Art, , ,	[Electronically Filed]	Date 07 / 24 / 2017
NOTE: Submission of false, errone	eous, or incomplete informatio	n may subject the person sign	ning this Report to the penalties of 52 U.S.C. § 3010
Office			FEC FORM 3X
Use Only			Rev. 05/2016

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

### Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO

01 2017 06 30 2017 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 383492.78 January 1. 2017 (b) Cash on Hand at 383492.78 Beginning of Reporting Period..... 367.55 367.55 Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 383860.33 383860.33 6(a) and 6(c) for Column B)..... 5112.45 5112.45 Total Disbursements (from Line 31)..... Cash on Hand at Close of 8. Reporting Period 378747.88 378747.88 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 62887.68 Schedule C and/or Schedule D) ..... 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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO

2017 06 30 2017 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 0.00 0.00 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized ..... (iii) TOTAL (add 0.00 0.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees ..... (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 0.00 0.00 Totals to Line 33, page 5) .....▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 367.55 (Dividends, Interest, etc.)..... 367.55 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3)..... 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) ....... (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))....... 367.55 367.55 20. Total Federal Receipts 367.55 367.55 (subtract Line 18(c) from Line 19) .......▶

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Dperating Expenditures:  a) Allocated Federal/Non-Federal		
	Activity (from Schedule H4)  (i) Federal Share	0.00	0.00
	(i) I ederal offare	4 4 4	
	(ii) Non-Federal Share	0.00	0.00
(	b) Other Federal Operating	4112.45	4112.45
(	Expenditures c) Total Operating Expenditures	4112.40	7112.70
`	(add 21(a)(i), (a)(ii), and (b))▶	4112.45	4112.45
	Fransfers to Affiliated/Other Party	0.00	0.00
3. (	Committees Contributions to	0.00	0.00
F	Federal Candidates/Committees and Other Political Committees	0.00	0.00
	ndependent Expenditures	0.00	
5. (	use Schedule E) Coordinated Party Expenditures	0.00	0.00
(	52 U.S.C. § 30116(d)) use Schedule F)	0.00	0.00
_		4 4 4	4 4 4
i. I	Loan Repayments Made	0.00	0.00
	_oans Made	0.00	0.00
	Refunds of Contributions To:  a) Individuals/Persons Other	4 4	4 4 4
,	Than Political Committees	0.00	0.00
(	b) Political Party Committees	0.00	0.00
	c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
(	d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0.00	0.00
9. (	Other Disbursements (Including		
1	Non-Federal Donations)	1000.00	1000.00
	Federal Election Activity (52 U.S.C. § 30101(20 (a) Allocated Federal Election Activity (from Schedule H6)	)))	
	(i) Federal Share	0.00	0.00
	(ii) "Lovin" Shoro		
(	(ii) "Levin" Shareb) Federal Election Activity Paid	0.00	0.00
'	Entirely With Federal Funds	0.00	0.00
(	c) Total Federal Election Activity (add		7 7 7
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5112.45	5112.45
, -	Total Federal Disbursements	72 72 72	4 4
	subtract Line 21(a)(ii) and Line 30(a)(ii)		
	rom Line 31)	5112.45	5112.45
	´ L	4 4	3112.45

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016) III. Net Contributions/

**Operating Expenditures** 

(from Line 11(d), page 3) .....

(from Line 28(d)).....

(subtract Line 34 from Line 33) .....

(add Line 21(a)(i) and Line 21(b)) .......▶

(from Line 15, page 3).....

(subtract Line 37 from Line 36) ......

33. Total Contributions (other than loans)

35. Net Contributions (other than loans)

36. Total Federal Operating Expenditures

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

34. Total Contribution Refunds

Page 5 **COLUMN A** COLUMN B **Total This Period** Calendar Year-to-Date 0.00 0.00 0.00 0.00 0.00 0.00 4112.45 4112.45 0.00 0.00 4112.45 4112.45

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

							PAGE		6	OF		11
Use separate schedule(s) for each category of the Detailed Summary Page	(c	(check only one)										
			11a		11b		11c		12			
Detailed Gammary Fage			13		14		15		16		X	17
not be sold or used by any person for the purpose of soliciting contributions												

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO Full Name of Individual (Last, First, Middle Initial) or Full Organization Name California Teachers Association Independent Expenditure Committee Date of Receipt Mailing Address 555 Capitol Mall, Suite 1425 07 2017 City Zip Code State Transaction ID: INCA165 CA Sacramento 95814 Amount of Each Receipt this Period FEC ID number of contributing 291.68 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Refund of payment. Receipt For: Aggregate Year-to-Date ▼ Primary General 291.68 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 291.68 SUBTOTAL of Receipts This Page (optional)..... 291.68 TOTAL This Period (last page this line number only).....

## S П

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 7 OF				
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only	· _ ·			
		Summary Page	<b>X</b> 21b 28a	22 23 28c 28c	26 27 29 30b		
Any information copied from such Reports and State	l ements may r	not be sold or use					
or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)							
Committee for Working Families,	sponsore 	d by the Cal	lifornia Lab	oor Federation, <i>i</i>	AFL-CIO		
Full Name (Last, First, Middle Initial)				Data of Dialassa			
A. Olson, Hagel & Fishburn LLP				Date of Disburseme	_		
Mailing Address 555 Capitol Mall, Suite 1425	01 / 13	2017					
City		FEC Identification N	Number				
Sacramento Purpose of Disbursement	CA	95814					
Legal & Reporting Services			001	C			
Candidate Name			Category/	Transaction ID  Amount of Fach Di			
			Type	Amount of Each Disbursement this Period			
	ement For:	Conoral		1353.73			
Senate President	Other (spec	General					
State: District:	opoc	··· <i>J1</i> ▼		Memo Item			
Full Name (Last, First, Middle Initial)							
B. Olson, Hagel & Fishburn LLP				Date of Disburseme	ent		
Mailing Address TTT O 11 11 11 O 11 11 O				M M / D D	/ Y Y Y Y Y		
Mailing Address 555 Capitol Mall, Suite 1425				02 16	2017		
City	State	Zip Code		FEC Identification N	Number		
Sacramento	CA	95814					
Purpose of Disbursement Legal & Reporting Services			001	C			
Candidate Name			Category/	Transaction ID	: EXPB164 sbursement this Period		
			Type	Amount of Lacif Di	spursement this renou		
Office Sought: House Disburs	ement For:			45	1150.12		
Senate	Primary Other (spec	General					
President State: District:		Memo Item					
Full Name (Last, First, Middle Initial)							
C. Olson, Hagel & Fishburn LLP				Date of Disburseme	ent		
· · ·				M M / D D	/ Y Y Y Y Y		
Mailing Address 555 Capitol Mall, Suite 1425				03 15	2017		
City	State	Zip Code		FEC Identification N	Jumbor		
Sacramento	CA	95814			vui IIDEI		
Purpose of Disbursement Legal & Reporting Services			001	C			
Candidate Name	001	Transaction ID					
			Category/ Type	Amount of Each Di	sbursement this Period		
Office Sought: House Disburs	ement For:				355.70		
Senate							
State: President	Other (spec	cify) 🔻		Memo Item			
State: District:							
SUBTOTAL of Disbursements This Page (optional)			·····•	45	2859.55		
			<u> </u>				
TOTAL This Period (last page this line number onl	y)				. ,		

## S 17

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 8 OF			
ITEMIZED DISBURSEMENTS		parate schedule(s) h category of the	(check only	(check only one)		
		Detailed Summary Page		22 23 26 27 28b 28c 29 30b		
Any information copied from such Reports and Stat	ements may	not be sold or us	sed by any pers			
or for commercial purposes, other than using the n						
NAME OF COMMITTEE (In Full)						
Committee for Working Families,	sponsor	ed by the Ca	ılifornia Lak	oor Federation, AFL-CIO		
Full Name (Last, First, Middle Initial)				Data of Dishuraaman		
A. Olson, Hagel & Fishburn LLP				Date of Disbursement		
Mailing Address 555 Capitol Mall, Suite 1425				04 14 2017		
City	FEC Identification Number					
Sacramento Purpose of Disbursement	CA	95814				
Purpose of Disbursement Legal & Reporting Services			001	C		
Candidate Name				Transaction ID : EXPB172 Amount of Each Disbursement this Period		
			Category/ Type	Amount of Lacii Dispuisement this Fellod		
	ement For:			494.64		
Senate	Primary	General				
State: President State:	Other (sp	ресіту) ▼		Memo Item		
Full Name (Last, First, Middle Initial)						
B. Gibson & Company, Inc.				Date of Disbursement		
				M = M / D = D / Y = Y = Y		
Mailing Address 4600 Northgate Blvd., Suite 115				05 05 2017		
City	State CA	Zip Code		FEC Identification Number		
Sacramento Purpose of Disbursement		95834		C		
Accounting Services	Transaction ID : EXPB171					
Candidate Name	Amount of Each Disbursement this Period					
Office Cought	Category/ Type					
Office Sought: House Disburs Senate	ement For: Primary	General		204.00		
President	Other (sp			п., .,		
State: District:				Memo Item		
Full Name (Last, First, Middle Initial)						
C. Olson, Hagel & Fishburn LLP				Date of Disbursement		
Mailing Address 555 Capitol Mall, Suite 1425				05 15 2017		
				10 10 101		
City	State	Zip Code		FEC Identification Number		
Sacramento Purpose of Disbursement	CA	95814				
Legal & Reporting Services			001	Transaction ID : EVERATA		
Candidate Name			Category/	Transaction ID : EXPB174 Amount of Each Disbursement this Period		
			Type			
	ement For:			290.70		
Senate President	Other (sp	General				
State: District:	_ Cuiei (Sp	▼		Memo Item		
SUBTOTAL of Disbursements This Page (optional)	)			989.34		
I TOTAL This Period (last page this line number on	IV)					

## S П

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 9 OF				
ITEMIZED DISBURSEMENTS		Llac concrete cohodula(a)		E NOMBER.			
II EINIIZED DISBURSEINIEN IS		category of the	21b	eck only one)  X 21b 22 23 26 27			
	Detailed	Summary Page	28a	28b 28c 29 30b			
Any information copied from such Reports and State	ments may	not be sold or us	ed by any perso	on for the purpose of soliciting contributions			
or for commercial purposes, other than using the na	me and addı	ress of any politic	cal committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)							
igr angle Committee for Working Families, s	sponsore	d by the Ca	lifornia Lab	or Federation, AFL-CIO			
Full Name (Last, First, Middle Initial)			1				
A. Olson, Hagel & Fishburn LLP				Date of Disbursement			
Olson, Hager & Hishbum EE	M M / D D / Y Y Y Y						
Mailing Address 555 Capitol Mall, Suite 1425	06 15 2017						
	State	Zip Code					
City Sacramento		FEC Identification Number					
Purpose of Disbursement	CA	95814		C			
Legal & Reporting Services			001				
Candidate Name			Category/	Transaction ID : EXPB175  Amount of Each Disbursement this Period			
			Type				
	ment For:			263.56			
Senate	Primary	General					
State: District:	Other (spec	city) $\blacktriangledown$		Memo Item			
Full Name (Last, First, Middle Initial)							
B.				Date of Disbursement			
				M = M / D = D / Y = Y = Y			
Mailing Address							
211	0	T 0 .					
City	State	Zip Code		FEC Identification Number			
Purpose of Disbursement				C			
Candidate Name	Amount of Each Disbursement this Period						
	ment For:	Conoral		7 7			
Senate President	Primary Other (spec	General					
State: District:	Other (oper	ony)		Memo Item			
Full Name (Last, First, Middle Initial)							
C.				Date of Disbursement			
				M M / D D / Y M Y M Y			
Mailing Address							
City	State	Zip Code					
	J.u.0			FEC Identification Number			
Purpose of Disbursement				C			
Candidate Name			Category/	Amount of Each Disbursement this Period			
Office Sought: House Disburse	ment For:		Type				
Senate Dispulse	Primary	General					
President	Other (spec			Mama Itam			
State: District:	1 , ,			Memo Item			
SUBTOTAL of Disbursements This Page (optional).				263.56			
				4112.45			
TOTAL This Period (last page this line number only	·)			4112.40			

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Any information copied from such Reports and State or for commercial purposes, other than using the na	i use sepa	roto ook! -! - ! - !	FOR LINE NUMBER: PAGE 10 OF 1					
	for each of	rate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c <b>x</b> 29 30b				
<u> </u>								
NAME OF COMMITTEE (In Full)								
Committee for Working Families, s	sponsore	d by the Cali	fornia Lab	or Federation, AFL-CIO				
Full Name (Last, First, Middle Initial) - Emerge California				Date of Disbursement				
Mailing Address 1624 Franklin Street, Suite 1001	04 26 2017							
City	FEC Identification Number							
Oakland Purpose of Disbursement	CA	94612						
Civic Donation			012	Transaction ID : EXPB170				
Candidate Name			Category/ Type	Amount of Each Disbursement this Period				
Senate	ement For: Primary	General		1000.00				
State: President State:	Other (spec	ify) 🔻		Memo Item				
Full Name (Last, First, Middle Initial)								
3.				Date of Disbursement				
Mailing Address				M   M   / D   D   / Y   Y   Y   Y   Y				
City	State	Zip Code		FEC Identification Number				
Purpose of Disbursement		C						
Candidate Name			Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disburse	ement For:		1,400					
Senate President	Primary	General						
State: District:	Other (spec	···y <i>)</i>		Memo Item				
Full Name (Last, First, Middle Initial)				Date of Disbursement				
Mailing Address				M M / D D / Y Y Y Y				
	State	Zip Code		FFC Identification Number				
City				FEC Identification Number				
City Purpose of Disbursement		Candidate Name Category/						
Purpose of Disbursement				Amount of Each Disbursement this Period				
Purpose of Disbursement  Candidate Name	ement For:		Category/ Type					
Purpose of Disbursement  Candidate Name	Primary	General		Amount of Each Disbursement this Period				
Purpose of Disbursement  Candidate Name  Office Sought: House Disburse Senate	7							
Purpose of Disbursement  Candidate Name  Office Sought: House Senate President	Primary Other (spec	ify) ▼	Type	Amount of Each Disbursement this Period				

# SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 11 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

NAME OF COMMITTEE (In Full)
Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO

A. Full Name (Last, First, Middle Initial) of Debtor	Nature of Debt (Purpose):		
California Labor Federation, AFI	Lodging and Travel Expenses for Canvassing. 10/20/16-11/28/16		
Mailing Address 600 Grand Avenue, Suite 410	_		
City	State	Zip Code	
Oakland	CA	94565	
Outstanding Balance Beginning This Period			Transaction ID : PAYD152
40768.80			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	40768.80
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
California Labor Federation, AFL			Lodging and Travel Expenses for Canvassing. 9/23/16-9/30/16
Mailing Address 600 Grand Avenue, Suite 410			
City	State	Zip Code	1
Oakland	CA	94565	
Outstanding Balance Beginning This Period			Transaction ID : PAYD60
11951.98			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	11951.98
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
California Labor Federation, AFI	CIO		Lodging and Travel Expenses for Canvassing. 10/1/16-10/19/16
Mailing Address 600 Grand Avenue, Suite 410			_
City	State	Zip Code	
Oakland	CA	94565	
Outstanding Balance Beginning This Period	•		Transaction ID : PAYD97
10166.90			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00	-	0.00	10166.90
SUBTOTALS This Period This Page (optional)		<b>&gt;</b>	62887.68
TOTALS This Period (last page this line number of	62887.68		
TOTAL OUTSTANDING LOANS from Schedule C	0.00		
ADD 2) and 3) and carry forward to appropriate I	62887.68		