

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Communications Workers of America Working Voices

ADDRESS (number and street) 501 3rd St NW Washington DC 20001 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00488486 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 08 / 01 / 2018 through 08 / 31 / 2018

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

Signature of Treasurer Steffens, Sara, , , [Electronically Filed] Date 09 / 20 / 2018

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Communications Workers of America Working Voices**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		40775.60
(b) Cash on Hand at Beginning of Reporting Period.....	23033.95	
(c) Total Receipts (from Line 19) .....	221818.88	858528.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	244852.83	899303.77
7. Total Disbursements (from Line 31).....	188125.45	842576.39
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	56727.38	56727.38
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	130.25	

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

**Communications Workers of America Working Voices**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	221818.88	858528.17
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	221818.88	858528.17
(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) .....	221818.88	858528.17
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	221818.88	858528.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	221818.88	858528.17

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	124648.69	268261.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	124648.69	268261.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	50000.00	400000.00
24. Independent Expenditures (use Schedule E) .....	10976.76	69783.95
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	2500.00	104530.79
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	188125.45	842576.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	188125.45	842576.39

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	221818.88	858528.17
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	221818.88	858528.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	124648.69	268261.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	124648.69	268261.65

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Communications Workers of America Working Voices**

**A. Communications Workers of America**

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

Mailing Address 501 Third Street, NW

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
858528.17

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 02 / 2018

**Transaction ID : C27700505**

Amount of Each Receipt this Period  
 37791.00

Memo Item

**B. Communications Workers of America**

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

Mailing Address 501 Third Street, NW

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
858528.17

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 06 / 2018

**Transaction ID : C27700506**

Amount of Each Receipt this Period  
 82500.00

Memo Item

**C. Communications Workers of America**

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

Mailing Address 501 Third Street, NW

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
858528.17

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 16 / 2018

**Transaction ID : C27700507**

Amount of Each Receipt this Period  
 45694.56

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	165985.56
<b>TOTAL</b> 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 7 OF 20  
(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)  
**Communications Workers of America Working Voices**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Communications Workers of America**

Mailing Address 501 Third Street, NW

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
858528.17

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		23		2018

**Transaction ID : C27700508**

Amount of Each Receipt this Period  
55833.32

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55833.32
<b>TOTAL</b> This Period (last page this line number only).....	221818.88

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Communications Workers of America Working Voices**

Full Name (Last, First, Middle Initial)

**A. 76 Words Corp.**

Mailing Address 1121 5th St, NW, 1st Floor

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Video Production- No express advocacy

004

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	06	/	2018

FEC Identification Number

C

Transaction ID : D38822

Amount of Each Disbursement this Period

80000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Berlin Rosen LTD**

Mailing Address 15 Maiden Lane, Suite 803

City  
New York

State  
NY

Zip Code  
10038

Purpose of Disbursement  
Radio Ad- no express advocacy

004

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	02	/	2018

FEC Identification Number

C

Transaction ID : D38821

Amount of Each Disbursement this Period

37791.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Communications Workers of America**

Mailing Address 501 Third Street, NW

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Canvass administrative & overhead expenses

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2018

FEC Identification Number

C

Transaction ID : D38820

Amount of Each Disbursement this Period

313.04

Memo Item

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

118104.04

**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"/> 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)  
**Communications Workers of America Working Voices**

**A. CWA Local 4400**

Full Name (Last, First, Middle Initial)

Mailing Address 2300 Montana Avenue, Suite 101

City Cincinnati State OH Zip Code 45211

Purpose of Disbursement  
Canvass administrative & overhead expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 16 / 2018

FEC Identification Number: C

Transaction ID : D38819

Amount of Each Disbursement this Period: 6544.65

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6544.65
<b>TOTAL</b> This Period (last page this line number only).....▶	124648.69

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Communications Workers of America Working Voices**

**A. WORKING FAMILIES PARTY INDEPENDENT EXPENDITURE COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address 1 METROTECH CENTER FL11

City Brooklyn State NY Zip Code 11201

Purpose of Disbursement Federal PAC Contribution WP34

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 27 / 2018

FEC Identification Number: C00626861  
**Transaction ID : D38572**

Amount of Each Disbursement this Period: 50000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	50000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	50000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Communications Workers of America Working Voices**

**A. West Virginia AFL-CIO General Fund**

Full Name (Last, First, Middle Initial)

Mailing Address 501 Leon Sullivan Way

City Charleston State WV Zip Code 25301

Purpose of Disbursement Non-Federal Committee Contrib 2018

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 08 / 2018

FEC Identification Number: C

Transaction ID : D38291

Amount of Each Disbursement this Period: 2500.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 20
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Communications Workers of America Working Voices**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Communications Workers of America</b>			Nature of Debt (Purpose): Shipping of Buttons, Bumper Stickers, Yard Signs
Mailing Address 501 Third Street, NW			
City Washington	State DC	Zip Code 20001	

Outstanding Balance Beginning This Period		<b>Transaction ID : D31712</b>	
130.25			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	130.25	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	130.25
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	130.25
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	130.25

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Communications Workers of America Working Voices
FEC IDENTIFICATION NUMBER
C C00488486

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee Berlin Rosen LTD
Mailing Address 15 Maiden Lane, Suite 803
City New York State NY Zip Code 10038
Purpose of Expenditure Fliers and Script for Canvassing
Category/Type 004
Name of Federal Candidate: Chabot, Steve, ,
Office Sought: House District: 01 State: OH
Disbursement For: General 2018
Amount 340.00
Transaction ID : D38464
Date of Disbursement or Obligation 08/16/2018

Full Name of Payee Berlin Rosen LTD
Mailing Address 15 Maiden Lane, Suite 803
City New York State NY Zip Code 10038
Purpose of Expenditure Fliers and Script for Canvassing
Category/Type 004
Name of Federal Candidate: Chabot, Steve, ,
Office Sought: House District: 01 State: OH
Disbursement For: General 2018
Amount 340.00
Transaction ID : D38465
Date of Disbursement or Obligation 08/16/2018

(a) SUBTOTAL of Itemized Independent Expenditures 680.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Steffens, Sara, , ,

[Electronically Filed]

Date 09/20/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Communications Workers of America Working Voices
FEC IDENTIFICATION NUMBER
C C00488486

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee Berlin Rosen LTD
Mailing Address 15 Maiden Lane, Suite 803
City New York State NY Zip Code 10038
Purpose of Expenditure Fliers and Script for Canvassing
Category/Type 004
Name of Federal Candidate: Chabot, Steve, ,
Office Sought: House District: 01 State: OH
Calendar Year-To-Date Per Election for Office Sought 5143.44
Disbursement For: General 2018

Full Name of Payee Berlin Rosen LTD
Mailing Address 15 Maiden Lane, Suite 803
City New York State NY Zip Code 10038
Purpose of Expenditure Fliers and Script for Canvassing
Category/Type 004
Name of Federal Candidate: Chabot, Steve, ,
Office Sought: House District: 01 State: OH
Calendar Year-To-Date Per Election for Office Sought 5143.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 680.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Steffens, Sara, , [Electronically Filed] Date 09 / 20 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Communications Workers of America Working Voices
FEC IDENTIFICATION NUMBER
C C00488486

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee Berlin Rosen LTD
Mailing Address 15 Maiden Lane, Suite 803
City New York State NY Zip Code 10038
Purpose of Expenditure Fliers and Script for Canvassing
Category/Type 004
Date of Public Distribution/Dissemination 08/23/2018
Amount 340.00
Transaction ID : D38468
Date of Disbursement or Obligation 08/16/2018
Name of Federal Candidate: Chabot, Steve, ,
Office Sought: House District: 01 State: OH
Disbursement For: General 2018

Full Name of Payee CWA Local 4400
Mailing Address 2300 Montana Avenue, Suite 101
City Cincinnati State OH Zip Code 45211
Purpose of Expenditure Lost Time Wages for Canvassing
Category/Type 001
Date of Public Distribution/Dissemination 08/20/2018
Amount 469.56
Transaction ID : D38474
Date of Disbursement or Obligation 08/16/2018
Name of Federal Candidate: Chabot, Steve, ,
Office Sought: House District: 01 State: OH
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 809.56
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Steffens, Sara, ,

[Electronically Filed]

Date 09/20/2018

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Communications Workers of America Working Voices</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00488486                 </div>
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Check if  24-hour report  48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>CWA Local 4400</b>	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 21 / 2018			
Mailing Address 2300 Montana Avenue, Suite 101	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     469.56                 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Cincinnati</td> <td style="width:17%; padding: 2px;">State OH</td> <td style="width:50%; padding: 2px;">Zip Code 45211</td> </tr> </table>		City Cincinnati	State OH	Zip Code 45211
City Cincinnati		State OH	Zip Code 45211	
Purpose of Expenditure Lost Time Wages for Canvassing				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Chabot, Steve, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: OH			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     5143.44                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶			

Full Name of Payee <input type="checkbox"/> Memo Item <b>CWA Local 4400</b>	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 22 / 2018			
Mailing Address 2300 Montana Avenue, Suite 101	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     469.56                 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Cincinnati</td> <td style="width:17%; padding: 2px;">State OH</td> <td style="width:50%; padding: 2px;">Zip Code 45211</td> </tr> </table>		City Cincinnati	State OH	Zip Code 45211
City Cincinnati		State OH	Zip Code 45211	
Purpose of Expenditure Lost Time Wages for Canvassing				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Chabot, Steve, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: OH			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     5143.44                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 939.12             </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 0.00             </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 939.12             </div>

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*Steffens, Sara, , ,*

**[Electronically Filed]**

Date M M / D D / Y Y Y Y Y Y  
09 / 20 / 2018

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Communications Workers of America Working Voices
FEC IDENTIFICATION NUMBER
C C00488486

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: CWA Local 4400
Mailing Address: 2300 Montana Avenue, Suite 101
City: Cincinnati, State: OH, Zip Code: 45211
Purpose of Expenditure: Lost Time Wages for Canvassing
Category/Type: 001
Date of Public Distribution/Dissemination: 08/23/2018
Amount: 469.56
Transaction ID: D38477
Date of Disbursement or Obligation: 08/16/2018
Name of Federal Candidate: Chabot, Steve, ,
Office Sought: House, District: 01, State: OH
Disbursement For: General 2018

Full Name of Payee: Communications Workers of America
Mailing Address: 501 Third Street, NW
City: Washington, State: DC, Zip Code: 20001
Purpose of Expenditure: Lost Time Wages for Canvassing
Category/Type: 001
Date of Public Distribution/Dissemination: 08/19/2018
Amount: 313.04
Transaction ID: D38469
Date of Disbursement or Obligation: 08/17/2018
Name of Federal Candidate: Chabot, Steve, ,
Office Sought: House, District: 01, State: OH
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures ..... 782.60
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures .....

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Signature: Steffens, Sara, , [Electronically Filed] Date: 09/20/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Communications Workers of America Working Voices
FEC IDENTIFICATION NUMBER
C C00488486

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Communications Workers of America
Mailing Address: 501 Third Street, NW
City: Washington, State: DC, Zip Code: 20001
Purpose of Expenditure: Lost Time Wages for Canvassing
Category/Type: 001
Date of Public Distribution/Dissemination: 08/20/2018
Amount: 313.04
Transaction ID: D38470
Date of Disbursement or Obligation: 08/17/2018
Name of Federal Candidate: Chabot, Steve, ,
Office Sought: House, District: 01, State: OH
Disbursement For: General 2018

Full Name of Payee: Communications Workers of America
Mailing Address: 501 Third Street, NW
City: Washington, State: DC, Zip Code: 20001
Purpose of Expenditure: Lost Time Wages for Canvassing
Category/Type: 001
Date of Public Distribution/Dissemination: 08/22/2018
Amount: 313.04
Transaction ID: D38471
Date of Disbursement or Obligation: 08/17/2018
Name of Federal Candidate: Chabot, Steve, ,
Office Sought: House, District: 01, State: OH
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures ..... 626.08
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures .....

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Signature Steffens, Sara, , ,

[Electronically Filed]

Date 09/20/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Communications Workers of America Working Voices
FEC IDENTIFICATION NUMBER
C C00488486

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Communications Workers of America
Mailing Address: 501 Third Street, NW
City: Washington, State: DC, Zip Code: 20001
Purpose of Expenditure: Lost Time Wages for Canvassing
Category/Type: 001
Date of Public Distribution/Dissemination: 08/22/2018
Amount: 313.04
Transaction ID: D38472
Date of Disbursement or Obligation: 08/17/2018
Name of Federal Candidate: Chabot, Steve, ,
Office Sought: House, District: 01, State: OH
Disbursement For: General 2018

Full Name of Payee: Communications Workers of America
Mailing Address: 501 Third Street, NW
City: Washington, State: DC, Zip Code: 20001
Purpose of Expenditure: Lost Time Wages for Canvassing
Category/Type: 001
Date of Public Distribution/Dissemination: 08/23/2018
Amount: 313.04
Transaction ID: D38473
Date of Disbursement or Obligation: 08/17/2018
Name of Federal Candidate: Chabot, Steve, ,
Office Sought: House, District: 01, State: OH
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures ..... 626.08
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures .....

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Signature Steffens, Sara, , ,

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Date 09/20/2018

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Communications Workers of America Working Voices</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00488486
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>bumperactive.com</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>5907 Burnet Rd.</b>	Amount <input type="text"/> <b>5833.32</b>
City <b>Austin</b> State <b>TX</b> Zip Code <b>78757</b>	
Purpose of Expenditure <b>T-shirts for members-identifying Fed Candidate</b> Category/Type <input type="text"/> <b>004</b>	
Name of Federal Candidate: <b>O'Rourke, Robert, Beto, ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> <b>5833.32</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/Type	
Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> <b>5833.32</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
<b>(c) TOTAL</b> Independent Expenditures .....	<input type="text"/> <b>10976.76</b>

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Steffens, Sara, , , [Electronically Filed] Date  /  /

Signature