



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**CAMPAIGN FOR WORKING FAMILIES**

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="2014"/>	<input type="text" value="776204.10"/>	<input type="text" value="776204.10"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="604468.08"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="73667.61"/>	<input type="text" value="252394.88"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="678135.69"/>	<input type="text" value="1028598.98"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="176149.69"/>	<input type="text" value="526612.98"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="501986.00"/>	<input type="text" value="501986.00"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="6760.44"/>	

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:  /  /  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).....	42194.01	161191.05
(ii) Unitemized .....	31471.94	90826.70
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	73665.95	252017.75
(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) .....	73665.95	252017.75
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.).....	1.66	377.13
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))..... ▶	73667.61	252394.88
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	73667.61	252394.88

**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 .....	26149.69	321477.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	26149.69	321477.98
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	150000.00	202500.00
24. Independent Expenditures (use Schedule E) .....	0.00	1625.00
25. Coordinated Party Expenditures (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	10.00
(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	10.00
29. Other Disbursements .....	0.00	1000.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	176149.69	526612.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	176149.69	526612.98

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	73665.95	252017.75
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	73665.95	252007.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	26149.69	321477.98
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	26149.69	321477.98

**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 167
<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. MR KEVIN ALONS**  
Full Name (Last, First, Middle Initial)

Mailing Address 140 GALLAND ST

City SALIX	State IA	Zip Code 51052
---------------	-------------	-------------------

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

Name of Employer IAANG	Occupation PILOT
---------------------------	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : SA11AI.12283**

Amount of Each Receipt this Period  

100.00
--------

**CONTRIBUTION**

**B. DAVID ASBURY**  
Full Name (Last, First, Middle Initial)

Mailing Address 950 E PACES FERRY RD NE STE 1100

City ATLANTA	State GA	Zip Code 30326
-----------------	-------------	-------------------

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

Name of Employer NORTHWESTERN BENEFIT CORPORATION	Occupation BUSINESS OWNER
--	------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
09	/	09	/	2014

**Transaction ID : SA11AI.11989**

Amount of Each Receipt this Period  

100.00
--------

**CONTRIBUTION**

**C. MR RANDY ATKINS**  
Full Name (Last, First, Middle Initial)

Mailing Address 13448 POPLAR AVE

City GRANT	State MI	Zip Code 49327
---------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation SELF EMPLOYED TRUCK DRIVER
-----------------------------------	--

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
09	/	11	/	2014

**Transaction ID : SA11AI.12253**

Amount of Each Receipt this Period  

500.00
--------

**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12283

0104562-0000443

Form/Schedule: SA11AI

Transaction ID: SA11AI.11989

0107820-0000188

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12253

0108420-0000419

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 9 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)  
**A. MR CHRIS AYERS**

Mailing Address 828 OLNEY OAK DRIVE

City HOUSTON      State TX      Zip Code 77079

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

Name of Employer CONOCO INDONESIA      Occupation MANAGE ECONOMICS & PLANNING

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2014  
**Transaction ID : SA11AI.12539**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR CHARLES D AYRES**

Mailing Address 4911 CASA ORO DR

City YORBA LINDA      State CA      Zip Code 92886

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

Name of Employer RETIRED      Occupation RETIRED

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 11 / 2014  
**Transaction ID : SA11AI.12795**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. DAVID BAIN**

Mailing Address 1000 PECAN DR

City MCKINNEY      State TX      Zip Code 75069

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

Name of Employer CORWIN ENGINEERING INCORPORATED      Occupation ENGINEER

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 05 / 2014  
**Transaction ID : SA11AI.12475**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12539

0111428-0000656

Form/Schedule: SA11AI

Transaction ID: SA11AI.12795

0103804-0000876

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12475

0104630-0000604

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 12 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MRS SHIRLEY BANTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2250 ELDRIDGE PKWY APT 211  
 City HOUSTON State TX Zip Code 77077  
 FEC ID number of contributing federal political committee. C  
 Name of Employer TRITEN- INC. Occupation HOUSEWIFE  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11AI.12533**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. MRS SHIRLEY BANTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2250 ELDRIDGE PKWY APT 211  
 City HOUSTON State TX Zip Code 77077  
 FEC ID number of contributing federal political committee. C  
 Name of Employer TRITEN- INC. Occupation HOUSEWIFE  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11AI.12534**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C. MR MATTHEW C BAKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3630 KACIN CT  
 City RICHFIELD State WI Zip Code 53076  
 FEC ID number of contributing federal political committee. C  
 Name of Employer SELF EMPLOYED Occupation COMPUTER MAINTENANCE  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2014  
**Transaction ID : SA11AI.12301**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 900.00  
**TOTAL** This Period (last page this line number only).....▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12533

0106328-0000651

Form/Schedule: SA11AI

Transaction ID: SA11AI.12534

0106328-0000652

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12301

0103827-0000457

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 15 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR DAVID J BATLUCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17 MULLIGAN DR  
 City READING State PA Zip Code 19606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HAVEN BEHAVIORAL HOSPITAL OF EASTER Occupation PHYSICIAN  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2014  
**Transaction ID : SA11AI.11821**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**B. DR GARY R BISHOP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15144 LARRY ST  
 City POWAY State CA Zip Code 92064  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RIVERSIDE COUNTY Occupation PHARMACIST  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11AI.12738**  
 Amount of Each Receipt this Period  
 35.00  
 CONTRIBUTION

**C. MR PHIL BOLLINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1901 CANTERBURY COURT CV  
 City CORDOVA State TN Zip Code 38016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ST FRANCIS Occupation IT MGR  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11AI.12133**  
 Amount of Each Receipt this Period  
 25.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 110.00  
**TOTAL** This Period (last page this line number only).....▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11821

0002355-0000052

Form/Schedule: SA11AI

Transaction ID: SA11AI.12738

0009108-0000824

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12133

0108922-0000318

Form/Schedule:

Transaction ID:

**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 18 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR WILLIAM P BORDUIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 BLACK SKIMMER CT  
 City EDGEWATER State MD Zip Code 21037  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2014  
**Transaction ID : SA11AI.11835**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B. MS SHELLEY B BREWER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 668 BLACK ANKLE RD  
 City LOCKHART State TX Zip Code 78644  
 FEC ID number of contributing federal political committee. C  
 Name of Employer SELF Occupation RETIRED RANCHER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : SA11AI.12580**  
 Amount of Each Receipt this Period  
 25.00  
 CONTRIBUTION

**C. JOSEPH BRINCK II**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5545 ANNAMARIE CT  
 City CINCINNATI State OH Zip Code 45247  
 FEC ID number of contributing federal political committee. C  
 Name of Employer STELTER & BRINCK- LTD Occupation CEO  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11AI.12193**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2025.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11835

0100966-0000062

Form/Schedule: SA11AI

Transaction ID: SA11AI.12580

0102849-0000691

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12193

0111555-0000370

Form/Schedule:

Transaction ID:

**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 21 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR TERRY O BRISTOL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1304 DUFF DR  
 STE 2 OFFICE 5  
 City FORT COLLINS State CO Zip Code 80524  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer 344E FOOTHILLS PARKWAY FC COLORADO Occupation ASSET MGR  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11AI.12624**  
 Amount of Each Receipt this Period  
 38.00  
 CONTRIBUTION

**B. MR DEL C BROOKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12789 MUIRFIELD BLVD N  
 City JACKSONVILLE State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SMURFIT STORE CONT. CORP Occupation GEN MGR  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2014  
**Transaction ID : SA11AI.12022**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**C. MR WENDELL BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 N FILLMORE ST  
 City ARLINGTON State VA Zip Code 22201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation ACCOUNTANT  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11AI.11856**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	138.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12624

0024811-0000727

Form/Schedule: SA11AI

Transaction ID: SA11AI.12022

0012784-0000219

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11856

0107255-0000080

Form/Schedule:

Transaction ID:

**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 24 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR WENDELL BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 N FILLMORE ST  
 City ARLINGTON State VA Zip Code 22201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation ACCOUNTANT  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11Al.11857**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. MRS KELLY BUCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2084 BROOK HIGHLAND RDG  
 City BIRMINGHAM State AL Zip Code 35242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FAMILY! Occupation MOM/GRANDMOM  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11Al.12091**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C. MR WILLIAM P BUCK JR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2084 BROOK HIGHLAND RDG  
 City BIRMINGHAM State AL Zip Code 35242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNIVERSITY OF ALABAMA Occupation MOM  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2014  
**Transaction ID : SA11Al.12092**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11857

0107255-0000081

Form/Schedule: SA11AI

Transaction ID: SA11AI.12091

0107104-0000276

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12092

0101854-0000278

Form/Schedule:

Transaction ID:

**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 27 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MRS LINDSAY BUCKNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 520 HENNESSY RD

City YAKIMA State WA Zip Code 98908

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

Name of Employer TREE TOP- INC. Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11AI.12904**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**B. LT COL RAY F BUTTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 541 PINE FOREST TRL

City ORANGE PARK State FL Zip Code 32073

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2014  
**Transaction ID : SA11AI.12017**

Amount of Each Receipt this Period  
 50.00

CONTRIBUTION

**C. LT COL RAY F BUTTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 541 PINE FOREST TRL

City ORANGE PARK State FL Zip Code 32073

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11AI.12018**

Amount of Each Receipt this Period  
 50.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12904

0107370-0000972

Form/Schedule: SA11AI

Transaction ID: SA11AI.12017

0104151-0000214

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12018

0104151-0000215

Form/Schedule:

Transaction ID:

**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 30 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. LT COL RAY F BUTTS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 541 PINE FOREST TRL  
 City ORANGE PARK State FL Zip Code 32073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11AI.12019**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**B. EARLE CANTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6212 S RANCH PARK LANE  
 City SPOKANE State WA Zip Code 99206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INTUITIVE SURGICAL Occupation SR. DIRECTOR  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2014  
**Transaction ID : SA11AI.12907**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. JACQUELINE CARDONE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24 N BRYN MAWR AVE # 153  
 City BRYN MAWR State PA Zip Code 19010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CARDONE INDUSTRIES Occupation BOARD MEMBER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11AI.11816**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12019

0104151-0000216

Form/Schedule: SA11AI

Transaction ID: SA11AI.12907

0111311-0000976

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11816

0110477-0000048

Form/Schedule:

Transaction ID:

**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 33 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial) <b>A. MR CHARLES DAN CHENOWETH</b>		Date of Receipt
Mailing Address 5515 W RICHEY ROAD		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
HOUSTON	TX	77066
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.12528</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
TWSCO	CHAIRMAN	<input type="text" value="1000.00"/>
Receipt For: 2014	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="2000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MRS MURIEL COFFMAN</b>		Date of Receipt
Mailing Address 11603 N 86TH ST		<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
SCOTTSDALE	AZ	85260
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.12681</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
HOUSEWIFE	HOUSEWIFE - HOUSBAND RETIRED	<input type="text" value="100.00"/>
Receipt For: 2014	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR RICHARD E COOLEY</b>		Date of Receipt
Mailing Address 617 KESTREL CT		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
WOODSTOCK	VA	22664
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.11861</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="100.00"/>
Receipt For: 2014	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1200.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12528

0111232-0000646

Form/Schedule: SA11AI

Transaction ID: SA11AI.12681

0101382-0000770

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11861

0001316-0000084

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 36 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR RICHARD E COOLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 617 KESTREL CT  
 City WOODSTOCK State VA Zip Code 22664  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11AI.11862**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**B. FRANK DEREMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 S CIRCLE DR  
 City SANTA CRUZ State CA Zip Code 95060  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11AI.12829**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C. KIRK DORN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6216 DEVINNEY CIRCLE  
 City ARVADA State CO Zip Code 80004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2014  
**Transaction ID : SA11AI.12606**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11862

0001316-0000085

Form/Schedule: SA11AI

Transaction ID: SA11AI.12829

0108847-0000906

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12606

0111475-0000712

Form/Schedule:

Transaction ID:

**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 39 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. KIRK DORN**  
Full Name (Last, First, Middle Initial)

Mailing Address 6216 DEVINNEY CIRCLE

City	State	Zip Code
ARVADA	CO	80004

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : SA11Al.12607**

Amount of Each Receipt this Period  

100.00
--------

**CONTRIBUTION**

**B. KATHLEEN ECHELBARGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 620 SUNSET AVENUE NORTH

City	State	Zip Code
EDMONDS	WA	98020

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

Name of Employer	Occupation
SELF	HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	11	/	2014

**Transaction ID : SA11Al.12874**

Amount of Each Receipt this Period  

250.00
--------

**CONTRIBUTION**

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

Mailing Address 6004 WOODGLEN CT

City	State	Zip Code
MOBILE	AL	36609

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

Name of Employer	Occupation
RETIRED	ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2014

**Transaction ID : SA11Al.12106**

Amount of Each Receipt this Period  

400.00
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**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12607

0111475-0000713

Form/Schedule: SA11AI

Transaction ID: SA11AI.12874

0111161-0000943

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12106

0014348-0000292

Form/Schedule:

Transaction ID:

**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 42 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR JAMES S ENGLUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6004 WOODGLEN CT  
 City MOBILE State AL Zip Code 36609  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RETIRED Occupation ENGINEER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2014  
**Transaction ID : SA11AI.12107**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**B. JERRY ERICKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 3006  
 City BOTHELL State WA Zip Code 98041  
 FEC ID number of contributing federal political committee. C  
 Name of Employer CE PUBLICATIONS- INC Occupation EDITOR AND PUBLISHER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2014  
**Transaction ID : SA11AI.12876**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C. MR MAYNARD M EYESTONE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1757 64TH AVE W  
 City LYNNWOOD State WA Zip Code 98037  
 FEC ID number of contributing federal political committee. C  
 Name of Employer NONE Occupation RETIRED  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11AI.12906**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	900.00
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12107

0014348-0000293

Form/Schedule: SA11AI

Transaction ID: SA11AI.12876

0108194-0000946

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12906

0111489-0000975

Form/Schedule:

Transaction ID:

**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 45 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR TOM FRANK**  
Full Name (Last, First, Middle Initial)

Mailing Address 7845 HOLDER ST

City BUENA PARK State CA Zip Code 90620

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11AI.12716**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

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

Mailing Address 4202 CASTLEGATE COURT

City ST JOSEPH State MO Zip Code 64505

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

Name of Employer ALTEC INDUSTRIES- INC Occupation RETIRED- NOW DO SOME CONSULTING

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11AI.12399**

Amount of Each Receipt this Period  
 200.00

CONTRIBUTION

**C. MR FRANCIS L FRIEND**  
Full Name (Last, First, Middle Initial)

Mailing Address 2125 LUANN LN APT 6

City MADISON State WI Zip Code 53713

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

Name of Employer SELF Occupation CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11AI.12308**

Amount of Each Receipt this Period  
 50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12716

0104849-0000804

Form/Schedule: SA11AI

Transaction ID: SA11AI.12399

0098609-0000541

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12308

0100234-0000463

Form/Schedule:

Transaction ID:

**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 48 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR CRAIG C FULLMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18 BELLEZZA  
 City IRVINE State CA Zip Code 92620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NVIDIA CORPORATION Occupation COMPUTER SALES  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11AI.12753**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. JOAN FULLMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2552 WALNUT AVENUE SUITE 230  
 City TUSTIN State CA Zip Code 92780  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11AI.12792**  
 Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**C. MR GREGORY S GEIGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12664 PROVIDENCE GLEN LN  
 City KNOXVILLE State TN Zip Code 37934  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MONSANTO Occupation RETIRED  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11AI.12131**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12753

0009143-0000837

Form/Schedule: SA11AI

Transaction ID: SA11AI.12792

0111596-0000872

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12131

0107711-0000315

Form/Schedule:

Transaction ID:

**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 51 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR EARL GJELDE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1235

City DILLON	State CO	Zip Code 80435
----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	11	/	2014

**Transaction ID : SA11AI.12619**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B. MR EARL GJELDE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1235

City DILLON	State CO	Zip Code 80435
----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2014

**Transaction ID : SA11AI.12620**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C. BOBBI J GOOD**  
Full Name (Last, First, Middle Initial)  
Mailing Address 18161 BASTANCHURY RD

City YORBA LINDA	State CA	Zip Code 92886
---------------------	-------------	-------------------

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

Name of Employer SELF	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : SA11AI.12796**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12619

0106982-0000722

Form/Schedule: SA11AI

Transaction ID: SA11AI.12620

0106982-0000723

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12796

0101686-0000877

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 54 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MRS PHYLLIS L GUNTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12939 JULINGTON RIDGE DR E  
 City JACKSONVILLE State FL Zip Code 32258  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 04 / 2014  
**Transaction ID : SA11AI.12025**  
 Amount of Each Receipt this Period  
 30.00  
 CONTRIBUTION

**B. MRS PHYLLIS L GUNTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12939 JULINGTON RIDGE DR E  
 City JACKSONVILLE State FL Zip Code 32258  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11AI.12026**  
 Amount of Each Receipt this Period  
 30.00  
 CONTRIBUTION

**C. MR CARL W GUSTKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 233 STATON RD  
 City CABOT State AR Zip Code 72023  
 FEC ID number of contributing federal political committee. C  
 Name of Employer FEDERAL EX - (WIFE) REBSAMEN R. H. Occupation PILOT - WIFE DEBORAH-RN  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11AI.12446**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110.00  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12025

0107460-0000223

Form/Schedule: SA11AI

Transaction ID: SA11AI.12026

0107460-0000224

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12446

0022519-0000580

Form/Schedule:

Transaction ID:

**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 57 OF 167
	<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
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	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR GARY HANSEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1604 N HIGHWAY 14

City AURORA State NE Zip Code 68818

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

Name of Employer SELF Occupation BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
09 / 10 / 2014  
Transaction ID : SA11AI.12438

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

**B. MICKEY HARLOW**  
Full Name (Last, First, Middle Initial)

Mailing Address 5421 CRESTVIEW DR

City MEMPHIS State TN Zip Code 38134

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

Name of Employer PARAMOUNT UNIFORM Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
09 / 17 / 2014  
Transaction ID : SA11AI.12137

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C. GWYNET HARPER**  
Full Name (Last, First, Middle Initial)

Mailing Address 6101 PRYOR LN

City FARMINGTON State NM Zip Code 87402

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

Name of Employer NONE Occupation HOME MAKER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1147.00

Date of Receipt  
09 / 16 / 2014  
Transaction ID : SA11AI.12702

Amount of Each Receipt this Period  
612.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 1162.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12438

0101730-0000572

Form/Schedule: SA11AI

Transaction ID: SA11AI.12137

0110226-0000321

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12702

0111083-0000790

Form/Schedule:

Transaction ID:

**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 60 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. LOU ANNE HARPER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4135 SANDRIDGE DR

City JACKSON State MS Zip Code 39211

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
09 / 14 / 2014  
**Transaction ID : SA11AI.12148**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

**B. MR CHARLES W HARRISON**  
Full Name (Last, First, Middle Initial)

Mailing Address 58 FERRY RD

City STOCKTON State NJ Zip Code 08559

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
09 / 11 / 2014  
**Transaction ID : SA11AI.11783**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 5924 CHILDRESS AVE

City SAINT LOUIS State MO Zip Code 63109

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

Name of Employer SELF EMPLOYED Occupation REALTOR

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
09 / 05 / 2014  
**Transaction ID : SA11AI.12391**

Amount of Each Receipt this Period  
25.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 725.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12148

0109135-0000332

Form/Schedule: SA11AI

Transaction ID: SA11AI.11783

0103982-0000021

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12391

0106366-0000535

Form/Schedule:

Transaction ID:

**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 63 OF 167
	<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
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	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR DALE HEDRICK**  
Full Name (Last, First, Middle Initial)

Mailing Address 2200 CENTRE PARK WEST DR STE 100

City WEST PALM BEACH State FL Zip Code 33409

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

Name of Employer HEDRICK BROTHERS Occupation CONTRACTOR

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
09 / 09 / 2014  
**Transaction ID : SA11AI.12045**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B. PAUL HEFFERNAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 6610 LOCUSTVIEW CT

City WEST BLOOMFIELD State MI Zip Code 48324

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

Name of Employer TK HOLDINGS Occupation LAB SUPERVISOR

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
09 / 12 / 2014  
**Transaction ID : SA11AI.12239**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**C. MR BRUCE T HENDERSON MD**  
Full Name (Last, First, Middle Initial)

Mailing Address 3730 BURNING TREE DR

City BLOOMFIELD State MI Zip Code 48302

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

Name of Employer SELF Occupation SURGEON

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
09 / 10 / 2014  
**Transaction ID : SA11AI.12237**

Amount of Each Receipt this Period  
400.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 950.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12045

0047814-0000239

Form/Schedule: SA11AI

Transaction ID: SA11AI.12239

0105230-0000409

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12237

0005155-0000406

Form/Schedule:

Transaction ID:

**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 66 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

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

Mailing Address 1100 QUEENS CT

City NAPERVILLE State IL Zip Code 60563

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

Name of Employer HUSBAND Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 14 / 2014  
**Transaction ID : SA11AI.12372**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B. MR EUGENE HENN**  
Full Name (Last, First, Middle Initial)

Mailing Address 2140 W HENRIETTA ROAD

City ROCHESTER State NY Zip Code 14623

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

Name of Employer BETTER POWER- INC. Occupation BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11AI.11796**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**C. SHERI HENSLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 10400 COUNTY ROAD 23

City CANADIAN State TX Zip Code 79014

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

Name of Employer SELF Occupation FINANCIAL PLANNER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2014  
**Transaction ID : SA11AI.12593**

Amount of Each Receipt this Period  
 50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1150.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12372

0105267-0000519

Form/Schedule: SA11AI

Transaction ID: SA11AI.11796

0103696-0000033

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12593

0107227-0000701

Form/Schedule:

Transaction ID:

**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 69 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. SHERI HENSLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 10400 COUNTY ROAD 23

City CANADIAN	State TX	Zip Code 79014
------------------	-------------	-------------------

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

Name of Employer SELF	Occupation FINANCIAL PLANNER
--------------------------	---------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2014

**Transaction ID : SA11AI.12594**

Amount of Each Receipt this Period  

25.00
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**CONTRIBUTION**

**B. MR ROBERT A HERRICK**  
Full Name (Last, First, Middle Initial)

Mailing Address 526 LOCHNESS LN

City CARY	State NC	Zip Code 27511
--------------	-------------	-------------------

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

Name of Employer HERRICK ENGINEERING INC.	Occupation ENGINEER
--	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2014

**Transaction ID : SA11AI.11903**

Amount of Each Receipt this Period  

50.00
-------

**CONTRIBUTION**

**C. MR CLAYTON L HOWIE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1673 POPLAR LN

City CAMANO ISLAND	State WA	Zip Code 98282
-----------------------	-------------	-------------------

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

Name of Employer THE SEATTLE TIMES	Occupation ASSISTANT MANAGER
---------------------------------------	---------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : SA11AI.12884**

Amount of Each Receipt this Period  

25.00
-------

**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12594

0107227-0000702

Form/Schedule: SA11AI

Transaction ID: SA11AI.11903

0002945-0000120

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12884

0100387-0000956

Form/Schedule:

Transaction ID:

**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 72 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MRS DIANA E HULL**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 LEWIS RD

City RIVERTON State WY Zip Code 82501

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

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
09 / 11 / 2014  
Transaction ID : SA11AI.12651

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 10715 POT SPRING RD

City COCKEYSVILLE State MD Zip Code 21030

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

Name of Employer RETIRED Occupation SURGEON

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
09 / 12 / 2014  
Transaction ID : SA11AI.11833

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C. MR SCOTT JACKSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 15 HILLSBOROUGH

City NEWPORT BEACH State CA Zip Code 92660

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

Name of Employer JACKSON- DEMARCO- TIDUS & PECKENPAL Occupation LAWYER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
09 / 13 / 2014  
Transaction ID : SA11AI.12769

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 1150.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12651

0008315-0000747

Form/Schedule: SA11AI

Transaction ID: SA11AI.11833

0002486-0000060

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12769

0034503-0000851

Form/Schedule:

Transaction ID:

**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 75 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MARC JOHANSEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 6403 RECREATION LN

City FALLS CHURCH State VA Zip Code 22041

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

Name of Employer BOEING Occupation BUSINESS

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **09 / 11 / 2014**

**Transaction ID : SA11AI.11850**

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

**B. MR ALDEN P JOHNSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 5010 LA BARRANCA ST

City SAN ANTONIO State TX Zip Code 78233

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

Name of Employer SELF Occupation MORTGAGE LOAN OFFICER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **09 / 05 / 2014**

**Transaction ID : SA11AI.12568**

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

**C. PANDORA JURISOO**  
Full Name (Last, First, Middle Initial)

Mailing Address 136 FOXRIDGE DRIVE

City HARVEST State AL Zip Code 35749

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **09 / 13 / 2014**

**Transaction ID : SA11AI.12093**

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **225.00**

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11850

0111064-0000074

Form/Schedule: SA11AI

Transaction ID: SA11AI.12568

0104518-0000680

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12093

0111455-0000279

Form/Schedule:

Transaction ID:

**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 78 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR JAMES J KAZMIERZAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11808 EAGLE VIEW COURT  
 City FORT WAYNE State IN Zip Code 46814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFO REQUESTED- NOT RECD Occupation INFO REQUESTED- NOT RECD  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 282.00

Date of Receipt 09 / 15 / 2014  
**Transaction ID : SA11AI.12220**  
 Amount of Each Receipt this Period 94.00  
 CONTRIBUTION

**B. DR JOHN D KEISLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35 ERICA LN  
 City BELEN State NM Zip Code 87002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LEIDOS Occupation SCIENTIST  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 12 / 2014  
**Transaction ID : SA11AI.12699**  
 Amount of Each Receipt this Period 40.00  
 CONTRIBUTION

**C. DR JOHN D KEISLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35 ERICA LN  
 City BELEN State NM Zip Code 87002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LEIDOS Occupation SCIENTIST  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 09 / 28 / 2014  
**Transaction ID : SA11AI.12700**  
 Amount of Each Receipt this Period 400.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 534.00  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12220

0111250-0000392

Form/Schedule: SA11AI

Transaction ID: SA11AI.12699

0100128-0000786

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Form/Schedule: SA11AI

Transaction ID : SA11AI.12700

0100128-0000787

Form/Schedule:

Transaction ID:

**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 81 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR WILLIAM LEE KING**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 192

City MOUNT TABOR State NJ Zip Code 07878

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

Name of Employer RIKER PANZIG ET AL Occupation COPY FAX ROOM

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
09 / 15 / 2014  
Transaction ID : SA11AI.11782

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**B. MR JOHN KIRKPATRICK**  
Full Name (Last, First, Middle Initial)

Mailing Address 13874 BELLA RIVA LN

City JACKSONVILLE State FL Zip Code 32225

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

Name of Employer UNIVERSITY OF FLORIDA Occupation SURGEON/EDUCATOR

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
09 / 17 / 2014  
Transaction ID : SA11AI.12023

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C. STEVEN KISTLER**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 30545

City EDMOND State OK Zip Code 73003

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

Name of Employer DEVON ENERGY PRODUCTION COMPANY Occupation LAND ADVISOR

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
09 / 17 / 2014  
Transaction ID : SA11AI.12456

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 1150.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11782

0052656-0000020

Form/Schedule: SA11AI

Transaction ID: SA11AI.12023

0003883-0000220

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12456

0111054-0000588

Form/Schedule:

Transaction ID:

**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 84 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. BOYD KUESTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 260 S STEWART ST

City NORTH LIBERTY State IA Zip Code 52317

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

Name of Employer ESSENCE OF LIFE HOSPICE Occupation PASTOR/CHAPLAIN

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
09 / 13 / 2014  
Transaction ID : SA11AI.12286

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**B. MR THOMAS J KUK**  
Full Name (Last, First, Middle Initial)

Mailing Address 32265 WEEPING WILLOW ST

City TRABUCO CANYON State CA Zip Code 92679

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 495.00

Date of Receipt  
09 / 22 / 2014  
Transaction ID : SA11AI.12780

Amount of Each Receipt this Period  
55.00

CONTRIBUTION

**C. DR ROBERT LA FLEUR**  
Full Name (Last, First, Middle Initial)

Mailing Address 2401 OKEMOS DR SE

City GRAND RAPIDS State MI Zip Code 49506

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

Name of Employer EMERGENCY CARE SPECIALISTS Occupation PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
09 / 08 / 2014  
Transaction ID : SA11AI.12265

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 605.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12286

0111301-0000446

Form/Schedule: SA11AI

Transaction ID: SA11AI.12780

0015893-0000862

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12265

0106854-0000428

Form/Schedule:

Transaction ID:

**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 87 OF 167
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. WILLIAM LEONARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6100 LAKE FORREST DR  
 City ATLANTA State GA Zip Code 30328  
 FEC ID number of contributing federal political committee. C  
 Name of Employer WM. LEONARD & CO. Occupation REAL ESTATE  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11AI.11991**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B. JOCELYN MANULLANG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8303 121ST AVE SE  
 City NEWCASTLE State WA Zip Code 98056  
 FEC ID number of contributing federal political committee. C  
 Name of Employer NONE Occupation HOMEMAKER/HOMESCHOOLING PARENT  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2014  
**Transaction ID : SA11AI.12879**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**C. JOCELYN MANULLANG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8303 121ST AVE SE  
 City NEWCASTLE State WA Zip Code 98056  
 FEC ID number of contributing federal political committee. C  
 Name of Employer NONE Occupation HOMEMAKER/HOMESCHOOLING PARENT  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11AI.12880**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11991

0111504-0000189

Form/Schedule: SA11AI

Transaction ID: SA11AI.12879

0107670-0000951

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12880

0107670-0000952

Form/Schedule:

Transaction ID:

**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 90 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MRS BONNIE MCCONNELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6960 CITRUS DRIVE  
 City SEMINOLE State FL Zip Code 33772  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PUBLIC SCHOOL SYSTEM Occupation TEACHER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 820.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2014  
**Transaction ID : SA11AI.12054**  
 Amount of Each Receipt this Period  
 35.00  
 CONTRIBUTION

**B. MR STEPHEN N MCCOY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6500 TERRACE DR  
 City DOWNERS GROVE State IL Zip Code 60516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation SELF  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11AI.12370**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**C. MRS MAE L MCKINLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 515 11TH AVENUE NE  
 City MINOT State ND Zip Code 58703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : SA11AI.12348**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 135.00  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12054

0108135-0000246

Form/Schedule: SA11AI

Transaction ID: SA11AI.12370

0019957-0000517

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12348

0101794-0000497

Form/Schedule:

Transaction ID:

**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 93 OF 167
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR DON P MORGAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3 WILD TURKEY LN

City LITTLETON State CO Zip Code 80127

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

Name of Employer FDSC- INC. Occupation SALESMAN

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 10 / 2014  
**Transaction ID : SA11AI.12614**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**B. WILLIAM MORGAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3110 DEL RIO PIKE

City FRANKLIN State TN Zip Code 37069

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

Name of Employer JOHN BOUCHARD & SONS CO. Occupation MANAGEMENT

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 17 / 2014  
**Transaction ID : SA11AI.12112**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C. JEAN NEWTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1330 COOSA RIVER RD

City DEATSVILLE State AL Zip Code 36022

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 05 / 2014  
**Transaction ID : SA11AI.12098**

Amount of Each Receipt this Period  
25.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 625.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12614

0008111-0000718

Form/Schedule: SA11AI

Transaction ID: SA11AI.12112

0111400-0000298

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12098

0106562-0000284

Form/Schedule:

Transaction ID:

**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 96 OF 167
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

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

Mailing Address 500 SUMMIT LAKE DR STE 120

City VALHALLA	State NY	Zip Code 10595
------------------	-------------	-------------------

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

Name of Employer C/O FUSION FINANCIAL GROUP	Occupation INFO REQUESTED- NOT RECD
--	--

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2014

**Transaction ID : SA11AI.11787**

Amount of Each Receipt this Period  

50.00
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**CONTRIBUTION**

**B. MR JOHN NICHOLS JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 1654 LA JOLLA RANCHO RD

City LA JOLLA	State CA	Zip Code 92037
------------------	-------------	-------------------

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

Name of Employer SELF	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2014

**Transaction ID : SA11AI.12736**

Amount of Each Receipt this Period  

500.00
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**CONTRIBUTION**

**C. MRS ELIZABETH J NOBLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 4015 OAK HARBOUR CIR

City GAINESVILLE	State GA	Zip Code 30506
---------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation INDEPENDENT CONSULTANT
-----------------------------------	--------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2014

**Transaction ID : SA11AI.12004**

Amount of Each Receipt this Period  

50.00
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**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11787

0108914-0000025

Form/Schedule: SA11AI

Transaction ID: SA11AI.12736

0105158-0000821

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12004

0083557-0000203

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 99 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)  
**A. MR MIKE PACK**

Mailing Address 2741 DE LA BRIANDAIS CT

City State Zip Code  
PINOLE CA 94564

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

Name of Employer Occupation  
KAISER PERMANENTE SYSTEM ARCHITECT

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 /  /   
 09 / 11 / 2014  
**Transaction ID : SA11AI.12814**

Amount of Each Receipt this Period  
  
 100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR MIKE PACK**

Mailing Address 2741 DE LA BRIANDAIS CT

City State Zip Code  
PINOLE CA 94564

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

Name of Employer Occupation  
KAISER PERMANENTE SYSTEM ARCHITECT

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 /  /   
 09 / 12 / 2014  
**Transaction ID : SA11AI.12815**

Amount of Each Receipt this Period  
  
 150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR MIKE PACK**

Mailing Address 2741 DE LA BRIANDAIS CT

City State Zip Code  
PINOLE CA 94564

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

Name of Employer Occupation  
KAISER PERMANENTE SYSTEM ARCHITECT

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
575.00

Date of Receipt  
 /  /   
 09 / 17 / 2014  
**Transaction ID : SA11AI.12816**

Amount of Each Receipt this Period  
  
 25.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶  275.00

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

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Form/Schedule: SA11AI

Transaction ID : SA11AI.12814

0012630-0000892

Form/Schedule: SA11AI

Transaction ID: SA11AI.12815

0012630-0000893

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12816

0012630-0000894

Form/Schedule:

Transaction ID:

**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 102 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR ALAN M PARK**  
Full Name (Last, First, Middle Initial)

Mailing Address 2193 RIDGEPOINTE CT

City State Zip Code  
WALNUT CREEK CA 94596

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

Name of Employer Occupation  
LAVANTE- INC. SALES VP

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
09 / 13 / 2014  
**Transaction ID : SA11Al.12819**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B. MR ALAN M PARK**  
Full Name (Last, First, Middle Initial)

Mailing Address 2193 RIDGEPOINTE CT

City State Zip Code  
WALNUT CREEK CA 94596

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

Name of Employer Occupation  
LAVANTE- INC. SALES VP

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  
09 / 13 / 2014  
**Transaction ID : SA11Al.12820**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 1630 EASTLAKE CIR

City State Zip Code  
TRACY CA 95304

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

Name of Employer Occupation  
TEXAS INSTRUMENTS ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
09 / 10 / 2014  
**Transaction ID : SA11Al.12831**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12819

0104554-0000897

Form/Schedule: SA11AI

Transaction ID: SA11AI.12820

0104554-0000898

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12831

0100155-0000909

Form/Schedule:

Transaction ID:

**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 105 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MRS CAROLE J PASQUALE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2306 ARBOR TRL  
 City COLLEYVILLE State TX Zip Code 76034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 09 / 23 / 2014  
**Transaction ID : SA11AI.12511**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. MRS NANCY PHARRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 174 EMERALD BAY  
 City LAGUNA BEACH State CA Zip Code 92651  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 09 / 11 / 2014  
**Transaction ID : SA11AI.12762**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. GARY POLLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5309 BRAEBURN DR  
 City BELLAIRE State TX Zip Code 77401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF LAWYER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 525.00

Date of Receipt  
 09 / 19 / 2014  
**Transaction ID : SA11AI.12545**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12511

0109306-0000632

Form/Schedule: SA11AI

Transaction ID: SA11AI.12762

0103953-0000845

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12545

0109024-0000662

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 108 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR DAVID G POPE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 8823  
 City HORSESHOE BAY State TX Zip Code 78657  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RETIRED FROM ERNST & YOUNG Occupation RETIRED PARTNER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11AI.12584**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. MR ART PRINDLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 733 BELL ST  
 City EAST PALO ALTO State CA Zip Code 94303  
 FEC ID number of contributing federal political committee. C  
 Name of Employer SELF Occupation GC  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11AI.12807**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. MR THOMAS RAINES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 405 PINEVIEW DR  
 City LAKE ODESSA State MI Zip Code 48849  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11AI.12250**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12584

0105049-0000694

Form/Schedule: SA11AI

Transaction ID: SA11AI.12807

0107332-0000887

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12250

0107997-0000416

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 111 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR SANDERS READ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 105 DOUGLAS HTS  
 City UNION State SC Zip Code 29379  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RETIRED Occupation RETIRED MINISTER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11AI.11950**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. DR PAUL A RIGGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 308 KEOMAH VLG  
 City OSKALOOSA State IA Zip Code 52577  
 FEC ID number of contributing federal political committee. C  
 Name of Employer MAHASKA HEALTH PARTNERSHIP Occupation PHYSICIAN  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11AI.12291**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. RICHARD SEABERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1424 VIA ZUMAYA  
 City PALOS VERDES ESTATES State CA Zip Code 90274  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11AI.12711**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 300.00  
**TOTAL** This Period (last page this line number only).....▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11950

0106985-0000159

Form/Schedule: SA11AI

Transaction ID: SA11AI.12291

0005704-0000450

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12711

0108068-0000799

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 114 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. Mr. WARREN SIMANDLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2322 VISTA MADERA  
 City State Zip Code  
 SANTA BARBARA CA 93101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SANTA BARBARA HIGH SCHOOL DIST PUBLIC SCHOOL TEACHER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11AI.12800**  
 Amount of Each Receipt this Period  
 25.00  
 CONTRIBUTION

**B. MR JONATHAN R SISK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1509 LAKEWOOD DR  
 City State Zip Code  
 LEXINGTON KY 40502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 AUDIO AUTHORITY CORP BUSINESS OWNER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2014  
**Transaction ID : SA11AI.12157**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C. MR RICK B SKINNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19111 SCENIC HIGHWAY 98  
 City State Zip Code  
 FAIRHOPE AL 36532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED ENGINEER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.07

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11AI.12103**  
 Amount of Each Receipt this Period  
 50.01  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 575.01  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12800

0009367-0000881

Form/Schedule: SA11AI

Transaction ID: SA11AI.12157

0098658-0000341

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12103

0111427-0000288

Form/Schedule:

Transaction ID:

**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 117 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR RICK B SKINNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 19111 SCENIC HIGHWAY 98

City State Zip Code  
FAIRHOPE AL 36532

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

Name of Employer Occupation  
RETIRED RETIRED ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.07

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 12 / 2014  
**Transaction ID : SA11AI.12102**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**B. DAVID SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 3039 PEDREGAL DR

City State Zip Code  
PRESCOTT AZ 86305

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

Name of Employer Occupation  
N/A RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 10 / 2014  
**Transaction ID : SA11AI.12695**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C. MRS DEBORAH E SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 3360 E TERRELL BRANCH CT SE

City State Zip Code  
MARIETTA GA 30067

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 05 / 2014  
**Transaction ID : SA11AI.11972**

Amount of Each Receipt this Period  
25.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 625.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12102

0012916-0000287

Form/Schedule: SA11AI

Transaction ID: SA11AI.12695

0110442-0000782

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11972

0027760-0000173

Form/Schedule:

Transaction ID:

**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 120 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MRS LINDA C SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 17618 REXWOOD ST

City LIVONIA State MI Zip Code 48152

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

Name of Employer ARBOR HOSPICE Occupation RN

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11AI.12236**

Amount of Each Receipt this Period  
 25.00

CONTRIBUTION

**B. LAKE C SPEED**  
Full Name (Last, First, Middle Initial)

Mailing Address 4025 OLD SALISBURY CONCORD RD

City KANNAPOLIS State NC Zip Code 28083

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

Name of Employer SELF Occupation REAL ESTATE MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11AI.11921**

Amount of Each Receipt this Period  
 25.00

CONTRIBUTION

**C. MS DIANE R SPRADLIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 5636 ENCORE DR

City DALLAS State TX Zip Code 75240

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : SA11AI.12498**

Amount of Each Receipt this Period  
 300.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12236

0038656-0000405

Form/Schedule: SA11AI

Transaction ID: SA11AI.11921

0027438-0000134

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12498

0103857-0000622

Form/Schedule:

Transaction ID:

**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 123 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MRS JAMES R STADLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 314 WALNUT DR  
 City NASHVILLE State TN Zip Code 37205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation HOUSEWIFE  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4350.00

Date of Receipt  
 09 / 23 / 2014  
**Transaction ID : SA11AI.12116**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. MRS TAMMY E STEINBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 WINDINGHAM DR NW  
 City HUNTSVILLE State AL Zip Code 35806  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HARRO APOTHERAPY Occupation HOMEMAKER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 09 / 17 / 2014  
**Transaction ID : SA11AI.12095**  
 Amount of Each Receipt this Period  
 25.00  
 CONTRIBUTION

**C. MR FRED T STIMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15 HILLWOOD RD  
 City MOBILE State AL Zip Code 36608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SCOTCH GULF LUMBER Occupation CEO  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 09 / 11 / 2014  
**Transaction ID : SA11AI.12105**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 525.00  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12116

0019059-0000303

Form/Schedule: SA11AI

Transaction ID: SA11AI.12095

0011951-0000281

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12105

0101392-0000290

Form/Schedule:

Transaction ID:

**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 126 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR RICHARD MOORE STIMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2404 SPRING HILL AVE APT 104  
 City MOBILE State AL Zip Code 36607  
 FEC ID number of contributing federal political committee. C  
 Name of Employer LEAVELL INVESTMENT MGT Occupation INVESTMENT ADVISOR  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : SA11AI.12104**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. MR WALTER STOTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7258 TWIN CANYON DR  
 City LAMBERTVILLE State MI Zip Code 48144  
 FEC ID number of contributing federal political committee. C  
 Name of Employer SELF Occupation PHYSICIAN  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11AI.12235**  
 Amount of Each Receipt this Period  
 175.00  
 CONTRIBUTION

**C. MR DOUGLAS D STRANDNESS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 727 SUMMIT AVE  
 City SAINT PAUL State MN Zip Code 55105  
 FEC ID number of contributing federal political committee. C  
 Name of Employer DUNBAR STRANDNESS INC Occupation BUSINESS OWNER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2014  
**Transaction ID : SA11AI.12316**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12104

0101393-0000289

Form/Schedule: SA11AI

Transaction ID: SA11AI.12235

0108312-0000404

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12316

0107177-0000471

Form/Schedule:

Transaction ID:

**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 129 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR DOUGLAS D STRANDNESS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 727 SUMMIT AVE  
 City SAINT PAUL State MN Zip Code 55105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DUNBAR STRANDNESS INC Occupation BUSINESS OWNER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11AI.12317**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. MR STEPHEN STUDE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32797 820TH ST  
 City BREWSTER State MN Zip Code 56119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation FARMER  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11AI.12340**  
 Amount of Each Receipt this Period  
 25.00  
 CONTRIBUTION

**C. DIANE SUNDQUIST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 958  
 City LYNNWOOD State WA Zip Code 98046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11AI.12911**  
 Amount of Each Receipt this Period  
 1000.00  
 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12317

0107177-0000472

Form/Schedule: SA11AI

Transaction ID: SA11AI.12340

0006116-0000491

**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 131 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial) <b>A. MR LARRY SUNDQUIST</b>		Date of Receipt
Mailing Address PO BOX 958		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City State Zip Code LYNNWOOD WA 98046		<b>Transaction ID : SA11AI.12877</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="4000.00"/>
Name of Employer Occupation TSC SERVICES HOME BUILDER		CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) <b>B. MR MARK SWISHER</b>		Date of Receipt
Mailing Address 24902 N POINT PLACE		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City State Zip Code KATY TX 77494		<b>Transaction ID : SA11AI.12549</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer Occupation AVIARA ENERGY CORPORATION ENGINEER		CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>

Full Name (Last, First, Middle Initial) <b>C. MRS CAROL D TEODORO</b>		Date of Receipt
Mailing Address 3008 E BAY DR NW		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City State Zip Code GIG HARBOR WA 98335		<b>Transaction ID : SA11AI.12889</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer Occupation ADVANCED WOMEN'S HEALTH RN		CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="4150.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12877

0101699-0000948

Form/Schedule: SA11AI

Transaction ID: SA11AI.12549

0048257-0000666

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12889

0103402-0000961

Form/Schedule:

Transaction ID:

**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 134 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial) <b>A. MR KEITH THORNTON</b>		Date of Receipt MM / DD / YYYY 09 / 17 / 2014 <b>Transaction ID : SA11AI.12489</b>
Mailing Address 5524 EDLEN DR		Amount of Each Receipt this Period 1000.00
City DALLAS	State TX	Zip Code 75220
FEC ID number of contributing federal political committee.	C	
Name of Employer SELF	Occupation DENTIST	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>B. MR ROBERT D THRASHER</b>		Date of Receipt MM / DD / YYYY 09 / 10 / 2014 <b>Transaction ID : SA11AI.12750</b>
Mailing Address 4301 PIONEER STREET		Amount of Each Receipt this Period 300.00
City IRVINE	State CA	Zip Code 92604
FEC ID number of contributing federal political committee.	C	
Name of Employer CSR TECHNOLOGY	Occupation ENGINEER	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. MR SCOTT THURMAN</b>		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 <b>Transaction ID : SA11AI.11935</b>
Mailing Address PO BOX 2589		Amount of Each Receipt this Period 200.00
City CASHIERS	State NC	Zip Code 28717
FEC ID number of contributing federal political committee.	C	
Name of Employer INGLES-MARKETS	Occupation PHARMACIST	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12489

0107076-0000614

Form/Schedule: SA11AI

Transaction ID: SA11AI.12750

0013798-0000834

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11935

0108269-0000146

Form/Schedule:

Transaction ID:

**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 137 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

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

Mailing Address 1444 BETHEL CHURCH RD

City ELKTON State VA Zip Code 22827

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

Name of Employer PAGE MEMORIAL HOSPITAL Occupation PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
09 / 21 / 2014  
**Transaction ID : SA11AI.11869**

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

**B. MS SHIRLEY F TONN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3180 MADRONA ST

City NORTH BEND State OR Zip Code 97459

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

Name of Employer RETIRED Occupation RETIRED EDUCATOR

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
09 / 10 / 2014  
**Transaction ID : SA11AI.12862**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**C. CLIFFORD TRACY**  
Full Name (Last, First, Middle Initial)

Mailing Address 18747 SAN FELIPE ST

City FOUNTAIN VALLEY State CA Zip Code 92798

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

Name of Employer RETIRED Occupation RETIRED CPA

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
09 / 11 / 2014  
**Transaction ID : SA11AI.12787**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11869

0002694-0000091

Form/Schedule: SA11AI

Transaction ID: SA11AI.12862

0020877-0000935

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12787

0111500-0000867

Form/Schedule:

Transaction ID:

**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 140 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR PHIL TROESTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 908 S U RD

City HAMPTON State NE Zip Code 68843

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

Name of Employer SELF Occupation FARMER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11AI.12442**

Amount of Each Receipt this Period  
 150.00

CONTRIBUTION

**B. DR JOHN TRUELSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 3108 CARUTH BLVD

City DALLAS State TX Zip Code 75225

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

Name of Employer MY EMPLOYER Occupation WORKER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11AI.12492**

Amount of Each Receipt this Period  
 2000.00

CONTRIBUTION

**C. ROBERT WALDEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 4395 COUNTRY QUAY LN

City MECHANICSVILLE State VA Zip Code 23111

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

Name of Employer RADIO ONE Occupation SALES

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : SA11AI.11874**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12442

0036221-0000576

Form/Schedule: SA11AI

Transaction ID: SA11AI.12492

0102387-0000617

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11874

0111345-0000096

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 143 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. ARTHUR WARNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 84 S GROVE ST  
 City State Zip Code  
 FOXBORO MA 02035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CHRISTIAN AND MISSIONARY ALLIANCE PASTOR  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11AI.11765**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. MRS GLENDA WEATHERLY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 1245  
 City State Zip Code  
 WHEELER TX 79096  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF RETIRED  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11AI.12596**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. MR JIM M WEISERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6535 E SANTA AURELIA  
 City State Zip Code  
 TUCSON AZ 85715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PROVIDENCE THREE SELF EMPLOYED  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2014  
**Transaction ID : SA11AI.12692**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.11765

0104604-0000006

Form/Schedule: SA11AI

Transaction ID: SA11AI.12596

0102813-0000703

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12692

0104406-0000779

Form/Schedule:

Transaction ID:

**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 146 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR DONALD A WHITE JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 9412 ROCKY HILLS DR

City State Zip Code  
CORDOVA TN 38018

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
09 / 19 / 2014  
Transaction ID : SA11AI.12134

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**B. FRED WHITMIRE JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 1202 PETER PAN RD

City State Zip Code  
LOOKOUT MOUNTAIN GA 30750

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

Name of Employer Occupation  
SELF DENTIST

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
850.00

Date of Receipt  
09 / 11 / 2014  
Transaction ID : SA11AI.12010

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

**C. MRS LOIS WIERENGA**  
Full Name (Last, First, Middle Initial)

Mailing Address 3442 OLDERIDGE DR NE

City State Zip Code  
GRAND RAPIDS MI 49525

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

Name of Employer Occupation  
GRAND RAPIDS PUBLIC SCHOOLS TEACHER

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
09 / 05 / 2014  
Transaction ID : SA11AI.12272

Amount of Each Receipt this Period  
25.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 325.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12134

0101707-0000319

Form/Schedule: SA11AI

Transaction ID: SA11AI.12010

0110826-0000207

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12272

0005517-0000434

Form/Schedule:

Transaction ID:

**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 149 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR TIM WINN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3325 CAMINO VALLAREAL

City ESCONDIDO	State CA	Zip Code 92029
-------------------	-------------	-------------------

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

Name of Employer SELF	Occupation TRUSTEE
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2014

**Transaction ID : SA11AI.12734**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B. MR TIM WINN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3325 CAMINO VALLAREAL

City ESCONDIDO	State CA	Zip Code 92029
-------------------	-------------	-------------------

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

Name of Employer SELF	Occupation TRUSTEE
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2014

**Transaction ID : SA11AI.12735**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C. MR STEVEN E WINTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2104 BENTHAM WAY

City YUKON	State OK	Zip Code 73099
---------------	-------------	-------------------

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

Name of Employer FAA / MUSTANG PUBLIC SCHOOLS	Occupation RETIRED AVIATION SAFETY INSPECTOR /
--	---

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2014

**Transaction ID : SA11AI.12457**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12734

0103506-0000818

Form/Schedule: SA11AI

Transaction ID: SA11AI.12735

0103506-0000819

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12457

0111547-0000589

Form/Schedule:

Transaction ID:

**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 152 OF 167
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A. MR STEVEN E WINTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2104 BENTHAM WAY

City YUKON State OK Zip Code 73099

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

Name of Employer FAA / MUSTANG PUBLIC SCHOOLS Occupation RETIRED AVIATION SAFETY INSPECTOR /

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
09 / 12 / 2014  
**Transaction ID : SA11Al.12458**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 20600 SW CITRUS BLVD

City INDIANTOWN State FL Zip Code 34956

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

Name of Employer TROPIC AIRPOWER Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
09 / 08 / 2014  
**Transaction ID : SA11Al.12070**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**C. MARK YOUNG**  
Full Name (Last, First, Middle Initial)

Mailing Address 20600 SW CITRUS BLVD

City INDIANTOWN State FL Zip Code 34956

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

Name of Employer TROPIC AIRPOWER Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
09 / 10 / 2014  
**Transaction ID : SA11Al.12071**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	42194.01

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12458

0111547-0000590

Form/Schedule: SA11AI

Transaction ID: SA11AI.12070

0102836-0000258

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.12071

0102836-0000259

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. 1st VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : SB21B.12916

Amount of Each Disbursement this Period

56.20

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address P.O. BOX 299051

City State Zip Code  
FT. LAUDERDALE FL 33329

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

Transaction ID : SB21B.12917

Amount of Each Disbursement this Period

5.74

Full Name (Last, First, Middle Initial)

**C. AUTHORIZE.NET**

Mailing Address P.O. BOX 8999

City State Zip Code  
SAN FRANCISCO CA 94128

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : SB21B.12915

Amount of Each Disbursement this Period

36.75

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

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

98.69

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

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. GARY BAUER**

Mailing Address 2800 S SHIRLINGTON RD #930

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement  
PAC CONSULTING POLITICAL AND ADMIN

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2014

Transaction ID : SB21B.12943

Amount of Each Disbursement this Period

11750.00

Full Name (Last, First, Middle Initial)

**B. BB&T**

Mailing Address 2800 S Quincy St.

City Arlington State VA Zip Code 22206

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : SB21B.12918

Amount of Each Disbursement this Period

61.92

Full Name (Last, First, Middle Initial)

**C. BB&T**

Mailing Address 2800 S Quincy St.

City Arlington State VA Zip Code 22206

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 22 / 2014

Transaction ID : SB21B.12913

Amount of Each Disbursement this Period

103.07

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

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

11914.99

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. BB&T**

Mailing Address 2800 S Quincy St.

City Arlington State VA Zip Code 22206

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : SB21B.12914**

Amount of Each Disbursement this Period

11.50

Full Name (Last, First, Middle Initial)

**B. CASTLE STRATEGIES**

Mailing Address 11105 HARROWFIELD ROAD

City CHARLOTTE State NC Zip Code 28226

Purpose of Disbursement  
PAC SOCIAL MEDIA CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2014

**Transaction ID : SB21B.12920**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. CHOI COMPANIES**

Mailing Address 5999 STEVENSON AVE #310

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2014

**Transaction ID : SB21B.12939**

Amount of Each Disbursement this Period

3125.67

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

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

5637.17

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. COMCAST**

Mailing Address P.O. BOX 3005

City State Zip Code  
SOUTHEASTERN PA 19398

Purpose of Disbursement  
OFFICE EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

**Transaction ID : SB21B.12940**

Amount of Each Disbursement this Period

245.63
--------

Full Name (Last, First, Middle Initial)

**B. DEER PARK**

Mailing Address P.O. BOX 52271

City State Zip Code  
PHOENIX AZ 85072

Purpose of Disbursement  
OFFICE EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2014

**Transaction ID : SB21B.12922**

Amount of Each Disbursement this Period

34.66
-------

Full Name (Last, First, Middle Initial)

**C. FEDERAL EXPRESS**

Mailing Address P.O. BOX 1140

City State Zip Code  
MEMPHIS TN 28101

Purpose of Disbursement  
SHIPPING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2014

**Transaction ID : SB21B.12923**

Amount of Each Disbursement this Period

62.90
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

343.19
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. FEDERAL EXPRESS**

Mailing Address P.O. BOX 1140

City MEMPHIS State TN Zip Code 28101

Purpose of Disbursement  
SHIPPING FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2014

Transaction ID : SB21B.12942

Amount of Each Disbursement this Period

60.05

Full Name (Last, First, Middle Initial)

**B. HELLER INFORMATION SERVICES**

Mailing Address 30 W GUDE DR, #220

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement  
COMPUTER SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2014

Transaction ID : SB21B.12944

Amount of Each Disbursement this Period

211.50

Full Name (Last, First, Middle Initial)

**C. IRON MOUNTAIN**

Mailing Address P.O. BOX 27128

City NEW YORK State NY Zip Code 10087

Purpose of Disbursement  
STORAGE FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2014

Transaction ID : SB21B.12924

Amount of Each Disbursement this Period

334.32

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

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

605.87

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. LEXIS NEXIS**

Mailing Address P.O. BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement  
DUES & SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2014

Transaction ID : SB21B.12925

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

**B. LPS**

Mailing Address P.O. BOX 2325

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement  
PAC DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2014

Transaction ID : SB21B.12929

Amount of Each Disbursement this Period

215.77

Full Name (Last, First, Middle Initial)

**C. LPS**

Mailing Address P.O. BOX 2325

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement  
PAC DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2014

Transaction ID : SB21B.12933

Amount of Each Disbursement this Period

162.83

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

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

728.60

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. LPS**

Mailing Address P.O. BOX 2325

City State Zip Code  
FAIRFAX VA 22031

Purpose of Disbursement  
PAC DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2014

Transaction ID : SB21B.12934

Amount of Each Disbursement this Period

322.73

Full Name (Last, First, Middle Initial)

**B. BILL MOELLER**

Mailing Address 2800 S SHIRLINGTON RD #930

City State Zip Code  
ARLINGTON VA 22206

Purpose of Disbursement  
PAC CONSULTING RESEARCH/WRITING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2014

Transaction ID : SB21B.12927

Amount of Each Disbursement this Period

2250.00

Full Name (Last, First, Middle Initial)

**C. OFFICE SHREDDING**

Mailing Address 6500 KANE WAY

City State Zip Code  
ELKRIDGE MD 21075

Purpose of Disbursement  
OFFICE EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2014

Transaction ID : SB21B.12945

Amount of Each Disbursement this Period

45.00

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

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

2617.73

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. Dorie Velezis**

Mailing Address 2800 S Shirlington Rd #930

City State Zip Code  
Arlington VA 22206

Purpose of Disbursement  
PAC COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 29 / 2014

Transaction ID : **SB21B.12941**

Amount of Each Disbursement this Period

2250.00

Full Name (Last, First, Middle Initial)

**B. VERIZON**

Mailing Address P.O. BOX 17577

City State Zip Code  
BALTIMORE MD 21297

Purpose of Disbursement  
TELEPHONE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 29 / 2014

Transaction ID : **SB21B.12946**

Amount of Each Disbursement this Period

436.21

Full Name (Last, First, Middle Initial)

**C. DEAN VIRAG**

Mailing Address 14511 RILLHURST DR

City State Zip Code  
CULPEPER VA 22701

Purpose of Disbursement  
WEBSITE SUPPORT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 09 / 2014

Transaction ID : **SB21B.12921**

Amount of Each Disbursement this Period

500.00

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

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

3186.21

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
PAC CAGING & DATA ENTRY SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	4

**Transaction ID : SB21B.12930**

Amount of Each Disbursement this Period

5	8	5	.	2	9
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. WEBSTER CHAMBERLAIN & BEAN**

Mailing Address 1747 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement  
LEGAL FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	4

**Transaction ID : SB21B.12926**

Amount of Each Disbursement this Period

4	0	5	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C.**

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

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

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

9	9	0	.	2	9
---	---	---	---	---	---

2	6	1	2	2	.	7	4
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**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. AMERICAN PRINCIPLES FUND**

Mailing Address 1420 K STREET NW SUITE 300

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**AMERICAN PRINCIPLES FUND**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	4

**Transaction ID : SB23.12937**

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
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**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

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--	--	--	--	--

**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

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

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

1	5	0	0	0	0	0	0	0	0
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1	5	0	0	0	0	0	0	0	0
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 165 OF 167
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AMERICA DIRECT</b>	Nature of Debt (Purpose): PAC DIRECT MAIL PRODUCTION
Mailing Address 1272 CORPORATE PARK DR	
City State Zip Code FOREST VA 24511	

Outstanding Balance Beginning This Period 2955.31	<b>Transaction ID : SD10.4357</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2955.31

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DIRECTECH</b>	Nature of Debt (Purpose): CAGING AND DATA PROCESSING SERVICES
Mailing Address 8595 GROVEMONT CIRCLE	
City State Zip Code GAITHERSBURG MD 20877	

Outstanding Balance Beginning This Period 223.11	<b>Transaction ID : SD10.4359</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 223.11

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>LPS</b>	Nature of Debt (Purpose): PAC DATA ENTRY SERVICES
Mailing Address P.O. BOX 2325	
City State Zip Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 215.77	<b>Transaction ID : SD10.11753</b>	
Amount Incurred This Period 0.00	Payment This Period 215.77	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	3178.42
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 166 OF 167
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>LPS</b>	Nature of Debt (Purpose): PAC DATA PROCESSING SERVICES
Mailing Address P.O. BOX 2325	
City State Zip Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.12931</b>	
Amount Incurred This Period 162.83	Payment This Period 162.83	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>LPS</b>	Nature of Debt (Purpose): PAC DATA PROCESSING SERVICES
Mailing Address P.O. BOX 2325	
City State Zip Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.12932</b>	
Amount Incurred This Period 322.73	Payment This Period 322.73	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>LPS</b>	Nature of Debt (Purpose): PAC DATA PROCESSING SERVICES
Mailing Address P.O. BOX 2325	
City State Zip Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.12947</b>	
Amount Incurred This Period 465.70	Payment This Period 0.00	Outstanding Balance at Close of This Period 465.70

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	465.70
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 167 OF 167
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MWM DIRECT MARKETING SERVICES</b>	Nature of Debt (Purpose): PAC DIRECT MAIL
Mailing Address 8048 HILLRISE COURT	
City State Zip Code ELKRIDGE MD 21075	

Outstanding Balance Beginning This Period 2320.90	<b>Transaction ID : SD10.4361</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2320.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>WASHINGTON INTELLIGENCE BUREAU</b>	Nature of Debt (Purpose): PAC CAGING AND DATA PROCESSING SERVICES
Mailing Address 4128 PEPSI PLACE	
City State Zip Code CHANTILLY VA 20151	

Outstanding Balance Beginning This Period 585.29	<b>Transaction ID : SD10.11751</b>	
Amount Incurred This Period 0.00	Payment This Period 585.29	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>WASHINGTON INTELLIGENCE BUREAU</b>	Nature of Debt (Purpose): PAC CAGING AND DATA PROCESSING SERVICES
Mailing Address 4128 PEPSI PLACE	
City State Zip Code CHANTILLY VA 20151	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.12948</b>	
Amount Incurred This Period 795.42	Payment This Period 0.00	Outstanding Balance at Close of This Period 795.42

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	3116.32
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	6760.44
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) ▶	6760.44