

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

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

ADDRESS (number and street)

555 Capitol Mall, Suite 400

Check if different  
than previously  
reported. (ACC)

Sacramento

CA

95814

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00626119

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y  
04 01 2018

through

M M / D D / Y Y Y Y Y Y  
06 30 2018

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

Pulaski, Art, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Pulaski, Art, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
07 12 2018

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

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

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
04 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2018</span>		402398.28
(b) Cash on Hand at Beginning of Reporting Period.....	189003.09	
(c) Total Receipts (from Line 19) .....	931566.32	1141600.34
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1120569.41	1543998.62
7. Total Disbursements (from Line 31) .....	827855.27	1251284.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	292714.14	292714.14
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

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

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		0	1		2	0	1	8		

To:

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	931271.90	1141271.90
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	931271.90	1141271.90
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.).....	294.42	328.44
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)) .....	931566.32	1141600.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	931566.32	1141600.34

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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 .....	724355.27	1067784.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	724355.27	1067784.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	100000.00	100000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	100000.00	100000.00
29. Other Disbursements (Including Non-Federal Donations).....	3500.00	83500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	827855.27	1251284.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	827855.27	1251284.48

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	931271.90	1141271.90
34. Total Contribution Refunds (from Line 28(d)) .....	100000.00	100000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	831271.90	1041271.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	724355.27	1067784.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	724355.27	1067784.48

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

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

FOR LINE NUMBER: PAGE 6 OF 15  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. California Federation of Teachers COPE Prop/Ballot Committee</b>			Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2018 <b>Transaction ID : INCA237</b>
Mailing Address 2550 North Hollywood Way, Suite 40			Amount of Each Receipt this Period 25000.00
City Burbank	State CA	Zip Code 91505	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 50000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. California Federation of Teachers COPE Prop/Ballot Committee</b>			Date of Receipt M M / D D / Y Y Y Y Y 04 / 19 / 2018 <b>Transaction ID : INCA252</b>
Mailing Address 2550 North Hollywood Way, Suite 40			Amount of Each Receipt this Period 75000.00
City Burbank	State CA	Zip Code 91505	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 50000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. NextGen Climate Action Committee</b>			Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2018 <b>Transaction ID : INCA246</b>
Mailing Address 700 13th Street, NW, Suite 600			Amount of Each Receipt this Period 400000.00
City Washington	State DC	Zip Code 20005	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 831271.90	

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

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

500000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 15

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

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

## **A. NextGen Climate Action Committee**

Mailing Address 700 13th Street, NW, Suite 600

City  
Washington

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

831271.90

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 14 / 2018

**Transaction ID : INCA260**

Amount of Each Receipt this Period

425000.00

☐ Memo Item

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

## **B. NextGen Climate Action Committee**

Mailing Address 700 13th Street, NW, Suite 600

City  
Washington

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

831271.90

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 21 / 2018

**Transaction ID : INCA269**

Amount of Each Receipt this Period

6271.90

☐ Memo Item

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

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

431271.90

931271.90

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

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

FOR LINE NUMBER: PAGE 8 OF 15

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

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

<b>A. Glacier Bank</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 49 Commons Loop City Kalispell State MT Zip Code 59901 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupation (for Individual) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 274.34			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 22 / 2018 <b>Transaction ID : INCA258</b> Amount of Each Receipt this Period 157.19 <input type="checkbox"/> Memo Item Interest Earned		
<b>B. Glacier Bank</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 49 Commons Loop City Kalispell State MT Zip Code 59901 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupation (for Individual) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 274.34			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 07 / 2018 <b>Transaction ID : INCA273</b> Amount of Each Receipt this Period 117.15 <input type="checkbox"/> Memo Item Interest Earned		
<b>C.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address City State Zip Code FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupation (for Individual) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date ▼			Date of Receipt M M / D D / Y Y Y Y Y Y  Amount of Each Receipt this Period  <input type="checkbox"/> Memo Item		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			274.34		
<b>TOTAL</b> This Period (last page this line number only)..... ▶			274.34		



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 15

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Los Angeles County Federation of Labor, AFL-CIO**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		17		2018

Mailing Address 2130 James Wood Blvd.

City  
Los AngelesState  
CAZip Code  
90006Purpose of Disbursement  
Voter registration and issue advocacy campaign

005

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : EXPB248

Amount of Each Disbursement this Period

40000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Los Angeles County Federation of Labor, AFL-CIO**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
05		04		2018

Mailing Address 2130 James Wood Blvd.

City  
Los AngelesState  
CAZip Code  
90006Purpose of Disbursement  
Voter registration and issue advocacy campaign

005

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : EXPB255

Amount of Each Disbursement this Period

40000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Miller Kaplan Arase LLP**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
06		19		2018

Mailing Address 4123 Lankershim Blvd.

City  
North HollywoodState  
CAZip Code  
91602

Purpose of Disbursement

001

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : EXPB268

Amount of Each Disbursement this Period

800.00

☐ Memo Item

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

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

80800.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 15

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Million Voter Project Action Fund**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	4			2	0	1	8		

Mailing Address 777 South Figueroa Street, Suite 4

City  
Los AngelesState  
CAZip Code  
90017Purpose of Disbursement  
Voter registration and issue advocacy campaign

005

Candidate Name

Million Voter Project Action Fund

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : EXPB256

Amount of Each Disbursement this Period

125000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Million Voter Project Action Fund**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	1		2	0	1	8		

Mailing Address 777 South Figueroa Street, Suite 4

City  
Los AngelesState  
CAZip Code  
90017Purpose of Disbursement  
Voter registration and issue advocacy campaign

005

Candidate Name

Million Voter Project Action Fund

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : EXPB262

Amount of Each Disbursement this Period

125000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Olson, Hagel & Fishburn LLP**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	6		2	0	1	8		

Mailing Address 555 Capitol Mall, Suite 400

City  
SacramentoState  
CAZip Code  
95814Purpose of Disbursement  
Legal & Reporting Services

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : EXPB254

Amount of Each Disbursement this Period

1599.52

☐ Memo Item

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

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

251599.52

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 15

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Olson, Hagel & Fishburn LLP**

Mailing Address 555 Capitol Mall, Suite 400

City  
SacramentoState  
CAZip Code  
95814Purpose of Disbursement  
Legal & Reporting Services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : EXPB261

Amount of Each Disbursement this Period

2207.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Olson, Hagel & Fishburn LLP**

Mailing Address 555 Capitol Mall, Suite 400

City  
SacramentoState  
CAZip Code  
95814Purpose of Disbursement  
Legal & Reporting Services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : EXPB267

Amount of Each Disbursement this Period

1509.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Orange County Voter Information Project**

Mailing Address 309 North Rampart Street, Suite A

City  
OrangeState  
CAZip Code  
92868Purpose of Disbursement  
Voter registration and issue advocacy campaign

005

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : EXPB257

Amount of Each Disbursement this Period

50000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

53716.75

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 15

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Sacramento Central Labor Council, AFL-CIO**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2018

Mailing Address 2840 El Centro Road, Suite 111

City  
SacramentoState  
CAZip Code  
95833Purpose of Disbursement  
Voter registration and issue advocacy campaign

005

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : EXPB250

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Valley Forward**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		18		2018

Mailing Address 3485 West Shaw, Suite 101

City  
FresnoState  
CAZip Code  
93711Purpose of Disbursement  
Voter registration and issue advocacy campaign

005

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : EXPB249

Amount of Each Disbursement this Period

50000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Valley Forward**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		30		2018

Mailing Address 3485 West Shaw, Suite 101

City  
FresnoState  
CAZip Code  
93711Purpose of Disbursement  
Voter registration and issue advocacy campaign

005

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : EXPB264

Amount of Each Disbursement this Period

50000.00

☐ Memo Item

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

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

103000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 15

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Working America**

Mailing Address 815 16th Street, NW

City  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
Voter registration and issue advocacy campaign

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : EXPB247

Amount of Each Disbursement this Period

80000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Working America**

Mailing Address 815 16th Street, NW

City  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
Voter registration and issue advocacy campaign

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : EXPB263

Amount of Each Disbursement this Period

155000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

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

235000.00

724116.27

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 15

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. California Federation of Teachers COPE Prop/Ballot Committee**

Mailing Address 2550 North Hollywood Way, Suite 40

City  
BurbankState  
CAZip Code  
91505Purpose of Disbursement  
Refund of Contributions

010

Candidate Name

California Federation of Teachers COPE Prop/Ballot Committee

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2018

FEC Identification Number

C

Transaction ID : EXPB253

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

100000.00

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

100000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 15

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Latinas Lead California**

Mailing Address 3605 Long Beach Blvd., #426

City  
Long BeachState  
CAZip Code  
90802Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Latinas Lead California**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				3	0		2	0	1	8		

FEC Identification Number

C

**Transaction ID : EXPB265**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Sacramento Central Labor Council - COPE**

Mailing Address 2840 El Centro Road, Suite 111

City  
SacramentoState  
CAZip Code  
95833Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Sacramento Central Labor Council - COPE**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				2	3		2	0	1	8		

FEC Identification Number

C

**Transaction ID : EXPB251**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3500.00

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

3500.00