

# 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**

**CAMPAIGN FOR WORKING FAMILIES**

ADDRESS (number and street) **2800 SHIRLINGTON ROAD, SUITE 930**

Check if different than previously reported. (ACC)

**ARLINGTON VA 22206**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

**C C00325076**

3. IS THIS REPORT  NEW (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)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

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

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on  /  /  in the State of

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

**10 18 2018 11 26 2018**

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

Type or Print Name of Treasurer **Velezis, Dorie, , ,**

Signature of Treasurer **Velezis, Dorie, , ,** [Electronically Filed] Date  /  /

**12 06 2018**

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

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="2018"/>		325738.14
(b) Cash on Hand at Beginning of Reporting Period.....	405066.92	
(c) Total Receipts (from Line 19) .....	58206.51	360490.48
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	463273.43	686228.62
7. Total Disbursements (from Line 31).....	101213.02	324168.21
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	362060.41	362060.41
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) .....	5499.62	

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

**CAMPAIGN FOR WORKING FAMILIES**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 18 / 2018 To: M M / D D / Y Y Y Y 11 / 26 / 2018

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).....	39099.16	255751.56
(ii) Unitemized .....	13956.17	85772.01
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	53055.33	341523.57
(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) .....	53055.33	341523.57
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).....	5146.50	6471.50
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	4.68	12495.41
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)).....▶	58206.51	360490.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	58206.51	360490.48

**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 .....	20307.88	206763.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	20307.88	206763.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35000.00	71500.00
24. Independent Expenditures (use Schedule E) .....	45655.14	45655.14
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 .....	250.00	250.00
(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)).....	250.00	250.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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)) ..	101213.02	324168.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	101213.02	324168.21

**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) .....	53055.33	341523.57
34. Total Contribution Refunds (from Line 28(d)) .....	250.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	52805.33	341273.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	20307.88	206763.07
37. Offsets to Operating Expenditures (from Line 15, page 3).....	5146.50	6471.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	15161.38	200291.57

**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 174
<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. ADAIR, RICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 608 S CEDAR HILLS TER  
 City SPRINGFIELD State MO Zip Code 65809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) PHOTOGRAPHY  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 27 / 2018  
**Transaction ID : SA11AI.26412**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**B. ADAMS, BAIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10097 QUINTANA DRIVE  
 City RENO State NV Zip Code 89521  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TANAMERA CONSTRUCTION Occupation (for Individual) PROJECT MANAGER  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 24 / 2018  
**Transaction ID : SA11AI.26538**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
**CONTRIBUTION**

**C. ADAMS, BAIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10097 QUINTANA DRIVE  
 City RENO State NV Zip Code 89521  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TANAMERA CONSTRUCTION Occupation (for Individual) PROJECT MANAGER  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 02 / 2018  
**Transaction ID : SA11AI.26539**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26412

0107821-000000280

Form/Schedule: SA11AI

Transaction ID: SA11AI.26538

0112802-000000402

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26539

0112802-000000403

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 9 OF 174
<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. AYRES, CHARLES, D, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

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 (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For: 2018  
 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
10	/	22	/	2018

**Transaction ID : SA11AI.26585**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

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 (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

**Transaction ID : SA11AI.26586**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 3630 KACIN CT

City RICHFIELD	State WI	Zip Code 53076
-------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COMPUTER MAINTENANCE
--	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

**Transaction ID : SA11AI.26364**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<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.26585

0103804-000000447

Form/Schedule: SA11AI

Transaction ID: SA11AI.26586

0103804-000000448

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26364

0103827-000000234

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 174
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. BARAN, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10225 MAIN ST  
 City CLARENCE State NY Zip Code 14031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CANDY DISTRIBUTION  
 Receipt For: 2018  
 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  
 10 / 31 / 2018  
**Transaction ID : SA11AI.26149**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**B. BENSON, CLIFF, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12921 DURANT RD  
 City RALEIGH State NC Zip Code 27614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2018  
**Transaction ID : SA11AI.26199**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**C. BIERI, CAROL, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 114 CHEMIN DE LA MONTAGNE  
 City CHENE-BOUGERIES State ZZ Zip Code 01224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) NONE  
 Receipt For: 2018  
 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  
 10 / 29 / 2018  
**Transaction ID : SA11AI.26130**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750.00
<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.26149

0112983-000000024

Form/Schedule: SA11AI

Transaction ID: SA11AI.26199

0108887-000000071

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26130

0112992-000000007

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 15 OF 174
	<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

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. BISHOP, GARY, R, DR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15144 LARRY STREET

City POWAY	State CA	Zip Code 92064
---------------	-------------	-------------------

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

Name of Employer (for Individual) RIVERSIDE COUNTY	Occupation (for Individual) PHARMACIST
---	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
385.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		05		2018

**Transaction ID : SA11AI.26556**

Amount of Each Receipt this Period  
35.00

Memo Item  
CONTRIBUTION

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

Mailing Address 344 E FOOTHILLS PARKWAY  
RED ROOM 9-W

City FORT COLLINS	State CO	Zip Code 80525
----------------------	-------------	-------------------

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

Name of Employer (for Individual) 344E FOOTHILLS PARKWAY FC COLORADO	Occupation (for Individual) ASSET MGR
---	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
418.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		05		2018

**Transaction ID : SA11AI.26502**

Amount of Each Receipt this Period  
38.00

Memo Item  
CONTRIBUTION

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

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 (for Individual) SMURFIT STORE CONT. CORP	Occupation (for Individual) GEN MGR
---	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
475.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		02		2018

**Transaction ID : SA11AI.26245**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	123.00
<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.26556

0009108-000000420

Form/Schedule: SA11AI

Transaction ID: SA11AI.26502

0024811-000000364



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26245

0012784-000000117

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 18 OF 174
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. BROWN, DAVID, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6198 BEEDE RD  
 City CHADWICK State IL Zip Code 61014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROYAL TRUCK Occupation (for Individual) TRUCK DRIVER  
 Receipt For: 2018  
 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  
 10 / 30 / 2018  
**Transaction ID : SA11AI.26396**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
 CONTRIBUTION

**B. BROWN, WENDELL, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2018  
**Transaction ID : SA11AI.26181**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 CONTRIBUTION

**C. BURAK, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2580 STONERIDGE DR  
 City COLORADO SPRINGS State CO Zip Code 80919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CRU Occupation (for Individual) SPORTS MINISTRY  
 Receipt For: 2018  
 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  
 10 / 27 / 2018  
**Transaction ID : SA11AI.26503**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 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.26396

0108933-000000264

Form/Schedule: SA11AI

Transaction ID: SA11AI.26181

0107255-000000057

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26503

0111144-000000365

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. BURKHALTER, DEBRA, M, MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 385 TALL OAKS DR

City BRANSON	State MO	Zip Code 65616
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) NONE
---	-------------------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2018

**Transaction ID : SA11AI.26410**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

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

Mailing Address 6212 S RANCH PARK LN

City SPOKANE	State WA	Zip Code 99206
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For: 2018  
 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
10		25		2018

**Transaction ID : SA11AI.26638**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**C. CARROLL, DAVID, S, MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 235 RIVEREDGE CV

City CORDOVA	State TN	Zip Code 38018
-----------------	-------------	-------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) SOFTWARE DEVELOPER
--	---

Receipt For: 2018  
 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
10		25		2018

**Transaction ID : SA11AI.26306**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<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.26410

0007001-000000278

Form/Schedule: SA11AI

Transaction ID: SA11AI.26638

0103911-000000500

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26306

0050026-000000176

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. COOLEY, RICHARD, E, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 617 KESTREL CT

City WOODSTOCK	State VA	Zip Code 22664
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For: 2018  
 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
10		18		2018

**Transaction ID : SA11AI.26187**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1408 STONE STEWART RD

City HULL	State GA	Zip Code 30646
--------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10		22		2018

**Transaction ID : SA11AI.26239**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 3521 SOUTHWESTERN BLVD

City DALLAS	State TX	Zip Code 75225
----------------	-------------	-------------------

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

Name of Employer (for Individual) WATERMARK COMMUNITY CHURCH	Occupation (for Individual) PASTOR
---	---------------------------------------

Receipt For: 2018  
 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
11		02		2018

**Transaction ID : SA11AI.26451**

Amount of Each Receipt this Period  
250.00

Memo Item  
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 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26187

0001316-000000061

Form/Schedule: SA11AI

Transaction ID: SA11AI.26239

0003407-000000110

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26451

0101146-000000313

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 3521 SOUTHWESTERN BLVD

City DALLAS	State TX	Zip Code 75225
----------------	-------------	-------------------

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

Name of Employer (for Individual) WATERMARK COMMUNITY CHURCH	Occupation (for Individual) PASTOR
---	---------------------------------------

Receipt For: 2018  
 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
11		06		2018

**Transaction ID : SA11AI.26452**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 2249 VIA VERDE

City EL CAJON	State CA	Zip Code 92019
------------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10		24		2018

**Transaction ID : SA11AI.26551**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 2249 VIA VERDE

City EL CAJON	State CA	Zip Code 92019
------------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10		31		2018

**Transaction ID : SA11AI.26552**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<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.26452

0101146-000000314

Form/Schedule: SA11AI

Transaction ID: SA11AI.26551

0107988-000000414

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26552

0107988-000000415

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 30 OF 174  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. DILLON, GARY, L, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9015 W SIERRA PINTA DR  
 City PEORIA State AZ Zip Code 85382  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TAX PREPARER  
 Receipt For: 2018  
 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  
 10 / 18 / 2018  
**Transaction ID : SA11AI.26523**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
**CONTRIBUTION**

**B. DILLON, GARY, L, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9015 W SIERRA PINTA DR  
 City PEORIA State AZ Zip Code 85382  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TAX PREPARER  
 Receipt For: 2018  
 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  
 10 / 26 / 2018  
**Transaction ID : SA11AI.26524**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
**CONTRIBUTION**

**C. DILLON, GARY, L, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9015 W SIERRA PINTA DR  
 City PEORIA State AZ Zip Code 85382  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TAX PREPARER  
 Receipt For: 2018  
 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  
 10 / 29 / 2018  
**Transaction ID : SA11AI.26525**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
**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 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26523

0103390-000000383

Form/Schedule: SA11AI

Transaction ID: SA11AI.26524

0103390-000000384

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26525

0103390-000000385

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. DORN, KIRK, L, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6216 DEVINNEY CIR

City ARVADA	State CO	Zip Code 80004
----------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10		29		2018

**Transaction ID : SA11AI.26491**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 7976 VIA VILLAGIO

City WEST PALM BEACH	State FL	Zip Code 33412
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) RETIRED DENTIST
---	--

Receipt For: 2018  
 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
10		26		2018

**Transaction ID : SA11AI.26256**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1441 SANDY POINT AVE SE

City GRAND RAPIDS	State MI	Zip Code 49546
----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For: 2018  
 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
10		29		2018

**Transaction ID : SA11AI.26354**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26491

0076011-000000355

Form/Schedule: SA11AI

Transaction ID: SA11AI.26256

0110435-000000127

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26354

0104465-000000226

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 174 (check only one)
<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

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. ECHELBARGER, KATHLEEN, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4001 198TH STREET SW

City LYNNWOOD	State WA	Zip Code 98036
------------------	-------------	-------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2750.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		15		2018

**Transaction ID : SA11AI.26625**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 32 CITATION ST

City EATONTOWN	State NJ	Zip Code 07724
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BB&R	Occupation (for Individual) FINANCIAL ADVISOR
---	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1550.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		23		2018

**Transaction ID : SA11AI.26138**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 32 CITATION ST

City EATONTOWN	State NJ	Zip Code 07724
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BB&R	Occupation (for Individual) FINANCIAL ADVISOR
---	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1650.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		31		2018

**Transaction ID : SA11AI.26139**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<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.26625

0112553-000000488

Form/Schedule: SA11AI

Transaction ID: SA11AI.26138

0112531-000000016

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26139

0112531-000000017

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. EGLOFF, CAPRICE, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27001 HIGHWAY 125

City YORKVILLE	State CA	Zip Code 95494
-------------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
11	/	21	/	2018

**Transaction ID : SA11AI.26607**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

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

Mailing Address 27001 HIGHWAY 128

City YORKVILLE	State CA	Zip Code 95494
-------------------	-------------	-------------------

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

Name of Employer (for Individual) JAYMES & JAYMES	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2018

**Transaction ID : SA11AI.26603**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 27001 HIGHWAY 128

City YORKVILLE	State CA	Zip Code 95494
-------------------	-------------	-------------------

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

Name of Employer (for Individual) JAYMES & JAYMES	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

**Transaction ID : SA11AI.26604**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1800.00
<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.26607

0113020-000000469

Form/Schedule: SA11AI

Transaction ID: SA11AI.26603

0101847-000000465



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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26604

0101847-000000466

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. EGLOFF, CRAIG, W, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27001 HIGHWAY 128

City YORKVILLE	State CA	Zip Code 95494
-------------------	-------------	-------------------

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

Name of Employer (for Individual) JAYMES & JAYMES	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

**Transaction ID : SA11AI.26605**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1916 E HANCEVILLE RD SE

City CULLMAN	State AL	Zip Code 35055
-----------------	-------------	-------------------

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

Name of Employer (for Individual) EIDSON & ASSOCIATES- INC.	Occupation (for Individual) GENERAL CONTRACTOR
--	---

Receipt For: 2018  
 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
10	/	18	/	2018

**Transaction ID : SA11AI.26270**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 2535 KARAMY CT

City COLORADO SPRINGS	State CO	Zip Code 80919
--------------------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10	/	20	/	2018

**Transaction ID : SA11AI.26504**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<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.26605

0101847-000000467

Form/Schedule: SA11AI

Transaction ID: SA11AI.26270

0101210-000000139

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26504

0108277-000000366

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. FARLEY, GEORGIA, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 2769  
 City ARNOLD State CA Zip Code 95223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) N/A  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 11 / 01 / 2018  
**Transaction ID : SA11AI.26601**  
 Amount of Each Receipt this Period  
 350.00  
 Memo Item  
**CONTRIBUTION**

**B. FRIEND, FRANCIS, L, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3895 MERIDIAN CIR  
 City VERONA State WI Zip Code 53593  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 670.00

Date of Receipt  
 11 / 05 / 2018  
**Transaction ID : SA11AI.26366**  
 Amount of Each Receipt this Period  
 60.00  
 Memo Item  
**CONTRIBUTION**

**C. FRYE, STEVEN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 968 MILLER RD  
 City STRASBURG State PA Zip Code 17579  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GOD Occupation (for Individual) GLOBAL MANAGEMENT CONSULTAN  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 235.00

Date of Receipt  
 10 / 29 / 2018  
**Transaction ID : SA11AI.26162**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	435.00
<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.26601

0112996-000000462

Form/Schedule: SA11AI

Transaction ID: SA11AI.26366

0100234-000000237

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26162

0107287-000000036

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 174
	<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

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. FRYE, STEVEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 968 MILLER RD

City STRASBURG	State PA	Zip Code 17579
-------------------	-------------	-------------------

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

Name of Employer (for Individual) GOD	Occupation (for Individual) GLOBAL MANAGEMENT CONSULTAN
--	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11	/	21	/	2018

**Transaction ID : SA11AI.26163**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

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

Mailing Address 18 BELLEZZA

City IRVINE	State CA	Zip Code 92620
----------------	-------------	-------------------

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

Name of Employer (for Individual) NVIDIA	Occupation (for Individual) COMPUTER SALES
---	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11	/	07	/	2018

**Transaction ID : SA11AI.26565**

Amount of Each Receipt this Period  
16.00

Memo Item  
CONTRIBUTION

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

Mailing Address 236 CROSS COUNTRY DR

City HEWITT	State TX	Zip Code 76643
----------------	-------------	-------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11	/	08	/	2018

**Transaction ID : SA11AI.26455**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	66.00
<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.26163

0107287-000000037

Form/Schedule: SA11AI

Transaction ID: SA11AI.26565

0009143-000000430

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26455

0100558-000000319

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 174
	<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

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. GUSTKE, CARL, W, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 233 STATON ROAD

City CABOT	State AR	Zip Code 72023
---------------	-------------	-------------------

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

Name of Employer (for Individual) FEDERAL EX - (WIFE) REBSAMEN R. H.	Occupation (for Individual) PILOT - WIFE DEBORAH-RN
---	--

Receipt For: 2018  
 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
11	/	05	/	2018

**Transaction ID : SA11AI.26432**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

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

Mailing Address 5611 189TH ST E

City PUYALLUP	State WA	Zip Code 98375
------------------	-------------	-------------------

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

Name of Employer (for Individual) HALL FOREST PRODUCTS- INC	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For: 2018  
 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
10	/	29	/	2018

**Transaction ID : SA11AI.26635**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 5382 MEADOW BROOK RD

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
11	/	02	/	2018

**Transaction ID : SA11AI.26277**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1150.00
<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.26432

0022519-000000299

Form/Schedule: SA11AI

Transaction ID: SA11AI.26635

0105085-000000497

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26277

0106489-000000145

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 54 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. HEATH, BONNIE, M, MR, III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7145 NW 125TH STREET RD  
 City REDDICK State FL Zip Code 32686  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BONNIE HEATH FARM- LLC Occupation (for Individual) THOROUGHBRED HORSE FARM OW  
 Receipt For: 2018  
 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  
 10 / 31 / 2018  
**Transaction ID : SA11AI.26247**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

**B. HEATH, JAMES, W, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 578  
 City CASCADE State ID Zip Code 83611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2018  
 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  
 10 / 29 / 2018  
**Transaction ID : SA11AI.26508**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

**C. HEATH, JAMES, W, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 578  
 City CASCADE State ID Zip Code 83611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2018  
**Transaction ID : SA11AI.26509**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 150.00  
**TOTAL** This Period (last page this line number only).....▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26247

0103677-000000119

Form/Schedule: SA11AI

Transaction ID: SA11AI.26508

0102348-000000370

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26509

0102348-000000371

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 57 OF 174
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. HEFFERNAN, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 (for Individual) JOYSON SAFETY SYSTEMS Occupation (for Individual) TEST LAB SUPERVISOR  
 Receipt For: 2018  
 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  
 10 / 30 / 2018  
**Transaction ID : SA11AI.26347**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

**B. HEFFNER, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 LANDSEER WAY  
 City ATLANTA State GA Zip Code 30350  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT  
 Receipt For: 2018  
 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  
 10 / 19 / 2018  
**Transaction ID : SA11AI.26236**  
 Amount of Each Receipt this Period  
 150.00  
 Memo Item  
 CONTRIBUTION

**C. HERRIN, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5201 MITCHELLDALE ST STE B2  
 City HOUSTON State TX Zip Code 77092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSTRUCTION  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2018  
**Transaction ID : SA11AI.26464**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26347

0105230-000000218

Form/Schedule: SA11AI

Transaction ID: SA11AI.26236

0111162-000000107

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26464

0110979-000000327

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. HERRIN, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5201 MITCHELLEDALE ST STE B2  
 City HOUSTON State TX Zip Code 77092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSTRUCTION  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2018  
**Transaction ID : SA11AI.26459**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

**B. HILL, MARGARET, L, MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1581 REDWING DR  
 City NEENAH State WI Zip Code 54956  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For: 2018  
 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  
 11 / 06 / 2018  
**Transaction ID : SA11AI.26373**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 CONTRIBUTION

**C. HOFF, JOANNE, R, MRS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1721 LINVALE HARBOURTON RD  
 City LAMBERTVILLE State NJ Zip Code 08530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CMSNJ Occupation (for Individual) SELF  
 Receipt For: 2018  
 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  
 10 / 25 / 2018  
**Transaction ID : SA11AI.26143**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<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.26459

0112987-000000322

Form/Schedule: SA11AI

Transaction ID: SA11AI.26373

0111955-000000243

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26143

0112081-000000021

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 63 OF 174
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

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

Mailing Address 3000 LEWIS RD

City RIVERTON	State WY	Zip Code 82501
------------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10		29		2018

**Transaction ID : SA11AI.26505**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

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 (for Individual) RETIRED	Occupation (for Individual) SURGEON
--	--

Receipt For: 2018  
 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
10		28		2018

**Transaction ID : SA11AI.26174**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 386 HURST MILL RD

City BREMEN	State GA	Zip Code 30110
----------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
11		05		2018

**Transaction ID : SA11AI.26228**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26505

0008315-000000367

Form/Schedule: SA11AI

Transaction ID: SA11AI.26174

0002486-000000048



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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26228

0102929-000000100

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. JACKSON, F, SCOTT, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 HILLSBOROUGH  
 City NEWPORT BEACH State CA Zip Code 92660  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JACKSONTIDUS Occupation (for Individual) LAWYER  
 Receipt For: 2018  
 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  
 10 / 22 / 2018  
**Transaction ID : SA11AI.26574**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item  
 CONTRIBUTION

**B. JOHANSEN, MARC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 (for Individual) BOEING Occupation (for Individual) BUSINESS  
 Receipt For: 2018  
 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  
 10 / 31 / 2018  
**Transaction ID : SA11AI.26180**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C. JOHNSON, ALDEN, P, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 (for Individual) SELF Occupation (for Individual) MORTGAGE LOAN OFFICER  
 Receipt For: 2018  
 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  
 11 / 05 / 2018  
**Transaction ID : SA11AI.26477**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	575.00
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26574

0112005-000000437

Form/Schedule: SA11AI

Transaction ID: SA11AI.26180

0111064-000000055

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26477

0104518-000000339

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 69 OF 174  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. JURISOO, PANDORA, , MRS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 136 FOXRIDGE DR  
 City HARVEST State AL Zip Code 35749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) HOMEMAKER  
 Receipt For: 2018  
 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  
 10 / 20 / 2018  
**Transaction ID : SA11AI.26281**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

**B. KING, SAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3808 MOSS BROOKE CT  
 City FAIRFAX State VA Zip Code 22031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IBM CORPORATION Occupation (for Individual) DIRECTOR  
 Receipt For: 2018  
 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  
 10 / 29 / 2018  
**Transaction ID : SA11AI.26179**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C. KNOLL, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 MONTECILLO DR  
 City ROLLING HILLS ESTATES State CA Zip Code 90274  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) HOUSEWIFE  
 Receipt For: 2018  
 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  
 10 / 30 / 2018  
**Transaction ID : SA11AI.26540**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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.26281

0106943-000000150

Form/Schedule: SA11AI

Transaction ID: SA11AI.26179

0109118-000000053

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26540

0112706-000000405

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. KOBEL, MICHAEL, T, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9764 CEDAR CT  
KOBEL FAMILY TRUST

City CYPRESS	State CA	Zip Code 90630
-----------------	-------------	-------------------

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

Name of Employer (for Individual) KOBEL FAMILY TRUST	Occupation (for Individual) ENGINEER
---	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

**Transaction ID : SA11AI.26542**

Amount of Each Receipt this Period  
20.00

Memo Item  
CONTRIBUTION

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

Mailing Address 23240 COUNTY ROAD 30

City ROGERS	State MN	Zip Code 55374
----------------	-------------	-------------------

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

Name of Employer (for Individual) KOTHRAD S&W	Occupation (for Individual) BOOKKEEPER
--	---

Receipt For: 2018  
 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
10		30		2018

**Transaction ID : SA11AI.26379**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

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

Mailing Address PO BOX 189

City WILLCOX	State AZ	Zip Code 85644
-----------------	-------------	-------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1675.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2018

**Transaction ID : SA11AI.26528**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	320.00
<b>TOTAL</b> This Period (last page this line number only).....	



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26542

0101140-000000407

Form/Schedule: SA11AI

Transaction ID: SA11AI.26379

0006021-000000248

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26528

0112486-000000388

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 75 OF 174
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. KRAUSE, JOSEPH, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 189  
 City WILLCOX State AZ Zip Code 85644  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) SELF Occupation (for Individual) ENGR  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2018  
**Transaction ID : SA11AI.26529**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**

**B. KROUCH, SHARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7412 MARION AVE  
 City KANSAS CITY State MO Zip Code 64133  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For: 2018  
 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  
 10 / 22 / 2018  
**Transaction ID : SA11AI.26408**  
 Amount of Each Receipt this Period  
 240.00  
 Memo Item  
**CONTRIBUTION**

**C. KUK, THOMAS, JOSEPH, Mrs.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For: 2018  
 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  
 10 / 18 / 2018  
**Transaction ID : SA11AI.26581**  
 Amount of Each Receipt this Period  
 60.00  
 Memo Item  
**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.26529

0108807-000000390

Form/Schedule: SA11AI

Transaction ID: SA11AI.26408

0107040-000000275

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26581

0015893-000000443

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. KUK, THOMAS, JOSEPH, Mrs.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 655.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 12 / 2018  
**Transaction ID : SA11AI.26582**  
 Amount of Each Receipt this Period  
 55.00  
 Memo Item  
**CONTRIBUTION**

**B. LA FLEUR, ROBERT, , DR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 (for Individual) EMERGENCY CARE SPECIALISTS Occupation (for Individual) PHYSICIAN  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2018  
**Transaction ID : SA11AI.26352**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**CONTRIBUTION**

**C. LARSEN, ELDON, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2562 TREASURE DR  
 City SANTA BARBARA State CA Zip Code 93105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2018  
 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  
 11 / 15 / 2018  
**Transaction ID : SA11AI.26591**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	330.00
<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.26582

0015893-000000444

Form/Schedule: SA11AI

Transaction ID: SA11AI.26352

0106854-000000223

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26591

0112554-000000454

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. LEBLEU, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7458 EASTLAKE RD  
 City STERLINGTON State LA Zip Code 71280  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DIXIE PULP & PAPER Occupation (for Individual) SALES  
 Receipt For: 2018  
 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  
 10 / 30 / 2018  
**Transaction ID : SA11AI.26429**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

**B. LEE, BRIAN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 292 JACKSONVILLE RD  
 City POMPTON PLAINS State NJ Zip Code 07444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BARTLETT LLP Occupation (for Individual) ATTORNEY  
 Receipt For: 2018  
 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  
 10 / 23 / 2018  
**Transaction ID : SA11AI.26137**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

**C. MAIER, MARILYN, , MRS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22808 WILDCAT ROAD  
 City GAITHERSBURG State MD Zip Code 20882  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ADVENTIST HEALTH CARE Occupation (for Individual) REGISTERED NURSE  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1169.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2018  
**Transaction ID : SA11AI.26172**  
 Amount of Each Receipt this Period  
 390.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	990.00
<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.26429

0106147-000000296

Form/Schedule: SA11AI

Transaction ID: SA11AI.26137

0106293-000000014

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26172

0112521-000000045

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. MAIER, MARILYN, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22808 WILDCAT ROAD

City GAITHERSBURG	State MD	Zip Code 20882
----------------------	-------------	-------------------

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

Name of Employer (for Individual) ADVENTIST HEALTH CARE	Occupation (for Individual) REGISTERED NURSE
--	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1369.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

**Transaction ID : SA11AI.26173**

Amount of Each Receipt this Period  
200.00

Memo Item CONTRIBUTION

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

Mailing Address 34056 AVOCADO DR N

City PINELLAS PARK	State FL	Zip Code 33781
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

**Transaction ID : SA11AI.26261**

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

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

Mailing Address 555 HARNESS RD

City MONUMENT	State CO	Zip Code 80132
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2018

**Transaction ID : SA11AI.26498**

Amount of Each Receipt this Period  
300.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	525.00
<b>TOTAL</b> 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.26173

0112521-000000046

Form/Schedule: SA11AI

Transaction ID: SA11AI.26261

0033776-000000133

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26498

0101654-000000359

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. MAY, STEPHEN, E, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 137

City MONTGOMERY	State IL	Zip Code 60538
--------------------	-------------	-------------------

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

Name of Employer (for Individual) PRESENCE MERCY HOSPITAL- AURORA- IL	Occupation (for Individual) CHAPLAIN
--	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M / D D / Y Y Y Y Y
11 / 04 / 2018

**Transaction ID : SA11AI.26394**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

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

Mailing Address 45012 70TH AVENUE

City LINN GROVE	State IA	Zip Code 51033
--------------------	-------------	-------------------

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

Name of Employer (for Individual) SIOUX CENTRAL SCHOOL	Occupation (for Individual) TEACHER
---	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M / D D / Y Y Y Y Y
11 / 05 / 2018

**Transaction ID : SA11AI.26363**

Amount of Each Receipt this Period  
20.00

Memo Item  
CONTRIBUTION

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

Mailing Address 6960 CITRUS DRIVE

City SEMINOLE	State FL	Zip Code 33772
------------------	-------------	-------------------

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

Name of Employer (for Individual) PUBLIC SCHOOL SYSTEM	Occupation (for Individual) TEACHER
---	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M / D D / Y Y Y Y Y
11 / 02 / 2018

**Transaction ID : SA11AI.26260**

Amount of Each Receipt this Period  
20.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<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.26394

0100231-000000262

Form/Schedule: SA11AI

Transaction ID: SA11AI.26363

0023485-000000233



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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26260

0108135-000000132

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 90 OF 174  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. MCLAIN, LARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 109 WEST 20TH  
 City HUTCHINSON    State KS    Zip Code 67502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A    Occupation (for Individual) N/A  
 Receipt For: 2018  
 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  
 10 / 18 / 2018  
**Transaction ID : SA11AI.26417**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item  
**CONTRIBUTION**

**B. MENELEE, BETH, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 355 RIVERDALE RD  
 City MACON    State GA    Zip Code 31204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) POLYWAD- INC.    Occupation (for Individual) OFFICE MANAGER  
 Receipt For: 2018  
 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  
 10 / 22 / 2018  
**Transaction ID : SA11AI.26241**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
**CONTRIBUTION**

**C. MORRISON, DAVID, , DR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1802 CROOM DR  
 City MONTGOMERY    State AL    Zip Code 36106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF    Occupation (for Individual) PHYSICIAN  
 Receipt For: 2018  
 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  
 10 / 23 / 2018  
**Transaction ID : SA11AI.26284**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**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.26417

0112340-000000286

Form/Schedule: SA11AI

Transaction ID: SA11AI.26241

0103017-000000113

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26284

0003940-000000153

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. MURRAY, MARGARET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3208 REYNOLDS RD  
 City INDEPENDENCE State MO Zip Code 64055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ATTORNEYS Occupation (for Individual) RETIRED LEGAL SECRETARY  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 29 / 2018  
**Transaction ID : SA11AI.26405**  
 Amount of Each Receipt this Period 30.00  
 Memo Item CONTRIBUTION

**B. NICHOLS, JOHN, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 (for Individual) ME Occupation (for Individual) RETIRED  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 29 / 2018  
**Transaction ID : SA11AI.26554**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C. NITZ, A, J, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 132 FARBROOK CIR  
 City FRANKFORT State KY Zip Code 40601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICAL THERAPIST  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2018  
**Transaction ID : SA11AI.26311**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	380.00
<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.26405

0108095-000000273

Form/Schedule: SA11AI

Transaction ID: SA11AI.26554

0105158-000000418

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26311

0043854-000000182

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. PACK, MIKE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2741 DE LA BRIANDAIS CT

City PINOLE	State CA	Zip Code 94564
----------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10		31		2018

**Transaction ID : SA11AI.26599**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

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

Mailing Address 4620 WEAVERHALL DRIVE

City FAYETTEVILLE	State NC	Zip Code 28314
----------------------	-------------	-------------------

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

Name of Employer (for Individual) INTERNATIONAL CHRISTIAN COMMUNITY-	Occupation (for Individual) US ARMY RETIRED
---	--

Receipt For: 2018  
 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
10		18		2018

**Transaction ID : SA11AI.26125**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

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

Mailing Address 15949 KENNICOTT LANE

City SAN DIEGO	State CA	Zip Code 92127
-------------------	-------------	-------------------

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

Name of Employer (for Individual) SENTIENT TECHNOLOGIES	Occupation (for Individual) SALES VP
--	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2018

**Transaction ID : SA11AI.26558**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26599

0012630-000000461

Form/Schedule: SA11AI

Transaction ID: SA11AI.26125

0112936-000000002

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26558

0112071-000000422

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 99 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. PARK, ALAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15949 KENNICOTT LANE  
 City SAN DIEGO State CA Zip Code 92127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SENTIENT TECHNOLOGIES Occupation (for Individual) SALES VP  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 27 / 2018  
**Transaction ID : SA11AI.26559**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 CONTRIBUTION

**B. PARK, ALAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15949 KENNICOTT LANE  
 City SAN DIEGO State CA Zip Code 92127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SENTIENT TECHNOLOGIES Occupation (for Individual) SALES VP  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 02 / 2018  
**Transaction ID : SA11AI.26560**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 CONTRIBUTION

**C. PARKER, BRIAN, R, Mr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2514 MEADOW DR  
 City ZEELAND State MI Zip Code 49464  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GENTEX CORP Occupation (for Individual) ENGINEER  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 10 / 23 / 2018  
**Transaction ID : SA11AI.26351**  
 Amount of Each Receipt this Period 220.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	420.00
<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.26559

0112071-000000423

Form/Schedule: SA11AI

Transaction ID: SA11AI.26560

0112071-000000424

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26351

0021018-000000221

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. PARTIN, ANNE, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 256 FOXHUNT LN

City HENDERSONVILLE	State NC	Zip Code 28791
------------------------	-------------	-------------------

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

Name of Employer (for Individual) MEDICAL MUTUAL GROUP	Occupation (for Individual) INSURANCE AGENT
---	--

Receipt For: 2018  
 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
10		19		2018

**Transaction ID : SA11AI.26214**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1600 STATE PARK RD

City LOCKHART	State TX	Zip Code 78644
------------------	-------------	-------------------

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

Name of Employer (for Individual) LOCAL SCHOOL DISTRICT	Occupation (for Individual) TEACHER
--	--

Receipt For: 2018  
 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
10		22		2018

**Transaction ID : SA11AI.26484**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1600 STATE PARK RD

City LOCKHART	State TX	Zip Code 78644
------------------	-------------	-------------------

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

Name of Employer (for Individual) LOCAL SCHOOL DISTRICT	Occupation (for Individual) TEACHER
--	--

Receipt For: 2018  
 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
10		29		2018

**Transaction ID : SA11AI.26485**

Amount of Each Receipt this Period  
50.00

Memo Item  
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 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26214

0106804-000000085

Form/Schedule: SA11AI

Transaction ID: SA11AI.26484

0111545-000000346

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26485

0111545-000000347

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 174
	<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

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. PHARRIS, NANCY, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

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 (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For: 2018  
 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
11	/	01	/	2018

**Transaction ID : SA11AI.26570**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

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

Mailing Address 7921 N TUSCANY DRIVE

City TUSCANY	State AZ	Zip Code 85742
-----------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
11	/	02	/	2018

**Transaction ID : SA11AI.26532**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 218 PERRYDALE AVE

City MEDFORD	State OR	Zip Code 97501
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) NONE
---	-------------------------------------

Receipt For: 2018  
 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
10	/	23	/	2018

**Transaction ID : SA11AI.26622**

Amount of Each Receipt this Period  
500.00

Memo Item  
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 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26570

0103953-000000433

Form/Schedule: SA11AI

Transaction ID: SA11AI.26532

0112141-000000395

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26622

0112447-000000484

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 108 OF 174
<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. PRINTZ, JEANNIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2011 N H ST  
 City MIDLAND State TX Zip Code 79705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2018  
 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  
 10 / 18 / 2018  
**Transaction ID : SA11AI.26488**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 CONTRIBUTION

**B. PRINTZ, JEANNIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2011 N H ST  
 City MIDLAND State TX Zip Code 79705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2018  
 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  
 10 / 29 / 2018  
**Transaction ID : SA11AI.26489**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 CONTRIBUTION

**C. PUCKETT, MALCOLM, WAYNE, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 632 FOREST LAKE DR N  
 City MACON State GA Zip Code 31210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) RETIRED SUPERVISOR OF ENGINEE  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2018  
**Transaction ID : SA11AI.26242**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 120.00  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26488

0110926-000000351

Form/Schedule: SA11AI

Transaction ID: SA11AI.26489

0110926-000000352

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26242

0112128-000000114

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 111 OF 174
	<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

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. READ, SANDERS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 DOUGLAS HTS

City UNION	State SC	Zip Code 29379
---------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED MINISTER
---	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2018

**Transaction ID : SA11AI.26216**

Amount of Each Receipt this Period  
130.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1220 PHILIP ST

City NEW ORLEANS	State LA	Zip Code 70130
---------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) BYRNE RICE TURNER
---	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

**Transaction ID : SA11AI.26428**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 5116 N VALADEZ ST

City LAS VEGAS	State NV	Zip Code 89149
-------------------	-------------	-------------------

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

Name of Employer (for Individual) FENCING SPECIALISTS INC	Occupation (for Individual) MANAGER
--	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2018

**Transaction ID : SA11AI.26537**

Amount of Each Receipt this Period  
20.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5150.00
<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.26216

0106985-000000088

Form/Schedule: SA11AI

Transaction ID: SA11AI.26428

0101783-000000294



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26537

0103454-000000401

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 114 OF 174
<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. RYEL, MARCIA, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7502 E PAGENT LN

City WICHITA	State KS	Zip Code 67206
-----------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10	/	29	/	2018

**Transaction ID : SA11AI.26415**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 5353 PIN OAK LANE

City DECATUR	State IL	Zip Code 62521
-----------------	-------------	-------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
345.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2018

**Transaction ID : SA11AI.26400**

Amount of Each Receipt this Period  
35.00

Memo Item  
CONTRIBUTION

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

Mailing Address 8508 YORKSHIRE DRIVE

City ORANGE	State TX	Zip Code 77632
----------------	-------------	-------------------

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

Name of Employer (for Individual) WAL-MART	Occupation (for Individual) PHARMACIST
---	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

**Transaction ID : SA11AI.26473**

Amount of Each Receipt this Period  
20.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	155.00
<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.26415

0104372-000000284

Form/Schedule: SA11AI

Transaction ID: SA11AI.26400

0100503-000000269

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26473

0013298-000000335

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. SIMANDLE, WARREN, , Mr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2322 VISTA MADERA  
 City SANTA BARBARA State CA Zip Code 93101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SANTA BARBARA HIGH SCHOOL DIST Occupation (for Individual) PUBLIC SCHOOL TEACHER  
 Receipt For: 2018  
 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  
 11 / 05 / 2018  
**Transaction ID : SA11AI.26590**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 CONTRIBUTION

**B. SISK, JONATHAN, R, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 168 TOWNE SQUARE PARK  
 City LEXINGTON State KY Zip Code 40511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AUDIO AUTHORITY CORP Occupation (for Individual) BUSINESS OWNER  
 Receipt For: 2018  
 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  
 10 / 18 / 2018  
**Transaction ID : SA11AI.26310**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION

**C. SKINNER, RICK, B, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19111 SCENIC HIGHWAY 98  
 City FAIRHOPE State AL Zip Code 36532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED ENGINEER  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 620.52

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2018  
**Transaction ID : SA11AI.26290**  
 Amount of Each Receipt this Period 60.08  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1085.08
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26590

0009367-000000453

Form/Schedule: SA11AI

Transaction ID: SA11AI.26310

0098658-000000180

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26290

0112644-000000158

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 174
	<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

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

Mailing Address 19111 SCENIC HIGHWAY 98

City FAIRHOPE	State AL	Zip Code 36532
------------------	-------------	-------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
720.52

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2018

**Transaction ID : SA11AI.26291**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 19111 SCENIC HIGHWAY 98

City FAIRHOPE	State AL	Zip Code 36532
------------------	-------------	-------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
780.60

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

**Transaction ID : SA11AI.26292**

Amount of Each Receipt this Period  
60.08

Memo Item  
CONTRIBUTION

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

Mailing Address 9143 COAL BANK RD

City MARSHALLVILLE	State OH	Zip Code 44645
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BUILDER
--	--

Receipt For: 2018  
 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
11	/	02	/	2018

**Transaction ID : SA11AI.26322**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1160.08
<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.26291

0112644-000000159

Form/Schedule: SA11AI

Transaction ID: SA11AI.26292

0112644-000000160

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26322

0054097-000000193

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 174
<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. SMITH, DEBORAH, E, MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3360 E TERRELL BRANCH COURT SE

City MARIETTA	State GA	Zip Code 30067
------------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
11		05		2018

**Transaction ID : SA11AI.26224**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

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

Mailing Address 17618 REXWOOD STREET

City LIVONIA	State MI	Zip Code 48152
-----------------	-------------	-------------------

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

Name of Employer (for Individual) ARBOR HOSPICE	Occupation (for Individual) RN
--	-----------------------------------

Receipt For: 2018  
 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
11		05		2018

**Transaction ID : SA11AI.26343**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

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

Mailing Address PO BOX 203

City KAAAWA	State HI	Zip Code 96730
----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) LANGUAGE CONSULTANT
---	--

Receipt For: 2018  
 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
10		26		2018

**Transaction ID : SA11AI.26610**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<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.26224

0027760-000000096

Form/Schedule: SA11AI

Transaction ID: SA11AI.26343

0038656-000000215

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26610

0103927-000000473

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 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. SNYDER, CAROL, ANNE, MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10166 MENNONITE RD

City RITTMAN	State OH	Zip Code 44270
-----------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10		29		2018

**Transaction ID : SA11AI.26321**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 14219 FLOWER CREEK LANE

City HOUSTON	State TX	Zip Code 77077
-----------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10		29		2018

**Transaction ID : SA11AI.26462**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 101 WINDINGHAM DR N W

City HUNTSVILLE	State AL	Zip Code 35806
--------------------	-------------	-------------------

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

Name of Employer (for Individual) HARRO APOTHERAPY	Occupation (for Individual) HOMEMAKER
---	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

**Transaction ID : SA11AI.26282**

Amount of Each Receipt this Period  
20.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1120.00
<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.26321

0107486-000000192

Form/Schedule: SA11AI

Transaction ID: SA11AI.26462

0112968-000000324

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26282

0011951-000000151

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 174
	<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

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. STEPHENSON, GLENN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1407 GUSMUS AVE

City MUSCLE SHOALS	State AL	Zip Code 35661
-----------------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10		23		2018

**Transaction ID : SA11AI.26278**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 26501 BROKEN BIT LN

City LAGUNA HILLS	State CA	Zip Code 92653
----------------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
11		01		2018

**Transaction ID : SA11AI.26571**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 15 HILLWOOD RD

City MOBILE	State AL	Zip Code 36608
----------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10		29		2018

**Transaction ID : SA11AI.26293**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<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.26278

0103916-000000147

Form/Schedule: SA11AI

Transaction ID: SA11AI.26571

0016854-000000435

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26293

0101392-000000162

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 132 OF 174
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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. STOLTZ, RANDALL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15401 N 45TH PL

City PHOENIX	State AZ	Zip Code 85032
-----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) ASSET MGR
---	--

Receipt For: 2018  
 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
11	/	01	/	2018

**Transaction ID : SA11AI.26516**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

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 (for Individual) RATHER NOT SAY	Occupation (for Individual) PHYSICIAN
---	--

Receipt For: 2018  
 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
10	/	31	/	2018

**Transaction ID : SA11AI.26342**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

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

Mailing Address 32797 820TH STREET

City BREWSTER	State MN	Zip Code 56119
------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For: 2018  
 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
11	/	05	/	2018

**Transaction ID : SA11AI.26381**

Amount of Each Receipt this Period  
25.00

Memo Item  
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.26516

0108191-000000377

Form/Schedule: SA11AI

Transaction ID: SA11AI.26342

0108312-000000213

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26381

0006116-000000250

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 135 OF 174  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. SWISHER, MARK, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24902 N POINTE PLACE  
 City KATY State TX Zip Code 77494  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) AVIARA ENERGY CORPORATION Occupation (for Individual) ENGINEER  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 05 / 2018  
**Transaction ID : SA11AI.26471**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 CONTRIBUTION

**B. TAILLON, TOM, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 542 FULLERTON AVE  
 City NEWPORT BEACH State CA Zip Code 92663  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) A. J. FAITH PROPERTIES Occupation (for Individual) REAL ESTATE DEVELOPER  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2018  
**Transaction ID : SA11AI.26576**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 CONTRIBUTION

**C. TAYLOR, ANNITA, , MRS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4306 ARP PL  
 City AMARILLO State TX Zip Code 79109  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) HOUSEWIFE Occupation (for Individual) HOUSEWIFE  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 11 / 12 / 2018  
**Transaction ID : SA11AI.26486**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 175.00  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26471

0048257-000000333

Form/Schedule: SA11AI

Transaction ID: SA11AI.26576

0107660-000000440



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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26486

0108011-000000349

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 138 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. THELEN, MARGO, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 545 LANE RD

City WOODLAND	State WA	Zip Code 98674
------------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10		25		2018

**Transaction ID : SA11AI.26637**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 454 PINE COURT

City MOBILE	State AL	Zip Code 36608
----------------	-------------	-------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2018

**Transaction ID : SA11AI.26294**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

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

Mailing Address 454 PINE COURT

City MOBILE	State AL	Zip Code 36608
----------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10		26		2018

**Transaction ID : SA11AI.26295**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<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.26637

0009845-000000499

Form/Schedule: SA11AI

Transaction ID: SA11AI.26294

0112831-000000164

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26295

0112831-000000165

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 141 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. THOMAS, AMELIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 454 PINE COURT  
 City MOBILE State AL Zip Code 36608  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) HUSBAND Occupation (for Individual) HOMEMAKER  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2018  
**Transaction ID : SA11AI.26296**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
 CONTRIBUTION

**B. TRUELSON, JOHN, , DR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3108 CARUTH BLVD  
 City DALLAS State TX Zip Code 75225  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) MY EMPLOYER Occupation (for Individual) WORKER  
 Receipt For: 2018  
 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  
 10 / 30 / 2018  
**Transaction ID : SA11AI.26453**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item  
 CONTRIBUTION

**C. ULLOM, BONNIE, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6111 CUTLASS CT  
 City NEW BERN State NC Zip Code 28560  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) MILITARY  
 Receipt For: 2018  
 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  
 10 / 30 / 2018  
**Transaction ID : SA11AI.26206**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 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.26296

0112831-000000166

Form/Schedule: SA11AI

Transaction ID: SA11AI.26453

0102387-000000316

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.26206

0109128-000000078

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 144 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. WEISERT, JIM, M, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6535 E SANTA AURELIA

City TUCSON	State AZ	Zip Code 85715
----------------	-------------	-------------------

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

Name of Employer (for Individual) PROVIDENCE THREE INC	Occupation (for Individual) SELF EMPLOYEED
---	---

Receipt For: 2018  
 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
10		18		2018

**Transaction ID : SA11AI.26530**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 6535 E SANTA AURELIA

City TUCSON	State AZ	Zip Code 85715
----------------	-------------	-------------------

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

Name of Employer (for Individual) PROVIDENCE THREE INC	Occupation (for Individual) SELF EMPLOYEED
---	---

Receipt For: 2018  
 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
11		01		2018

**Transaction ID : SA11AI.26531**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C. WHITE, DONALD, A, MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9412 ROCKY HILLS DRIVE

City CORDOVA	State TN	Zip Code 38018
-----------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
11		19		2018

**Transaction ID : SA11AI.26307**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<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.26530

0104406-000000392

Form/Schedule: SA11AI

Transaction ID: SA11AI.26531

0104406-000000393

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26307

0101707-000000177

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 147 OF 174
<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. WHITEMAN, WARD, A, MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4007 NORWOOD ST

City MIDLAND	State TX	Zip Code 79707
-----------------	-------------	-------------------

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

Name of Employer (for Individual) CONCHO RESOURCES	Occupation (for Individual) GEOLOGIST
---	--

Receipt For: 2018  
 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
10	/	22	/	2018

**Transaction ID : SA11AI.26490**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 962 PLUM COURT

City MOSCOW	State ID	Zip Code 83843
----------------	-------------	-------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2018

**Transaction ID : SA11AI.26515**

Amount of Each Receipt this Period  
30.00

Memo Item  
CONTRIBUTION

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

Mailing Address 414 HENRY DRIVE

City BELGRADE	State MT	Zip Code 59714
------------------	-------------	-------------------

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

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

Receipt For: 2018  
 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
10	/	19	/	2018

**Transaction ID : SA11AI.26385**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1280.00
<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.26490

0059494-000000353

Form/Schedule: SA11AI

Transaction ID: SA11AI.26515

0112569-000000376

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26385

0112112-000000253

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 150 OF 174  
(check only one)

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

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

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**ZECK, DONNA, , ,**

Mailing Address **15141 152ND AVE NE**

City <b>WOODINVILLE</b>	State <b>WA</b>	Zip Code <b>98072</b>
----------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) <b>SELF</b>	Occupation (for Individual) <b>RETIRED</b>
--	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2500.00**

Date of Receipt  
**11 / 01 / 2018**

**Transaction ID : SA11AI.26628**

Amount of Each Receipt this Period  
**2500.00**

Memo Item  
**CONTRIBUTION**

**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:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

**C.** 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:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>39099.16</b>

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.26628

0108966-000000491

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 152 OF 174  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

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

**A. CHOI COMPANIES**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5999 STEVENSON AVE #310  
 City ALEXANDRIA State VA Zip Code 22304  
 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 ▼  
 5146.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2018  
**Transaction ID : SA15.26722**  
 Amount of Each Receipt this Period  
 5146.50  
 Memo Item  
**REFUND OF SECURITY DEPOSIT**

**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:  
 Primary  General  
 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  
 Memo Item

**C.**  
 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:  
 Primary  General  
 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  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5146.50
<b>TOTAL</b> This Period (last page this line number only).....	5146.50



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

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

FOR LINE NUMBER:  
(check only one)

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

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**

Full Name (Last, First, Middle Initial)

**A. 1st VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.26687

Amount of Each Disbursement this Period

[REDACTED] 35.25

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN VALUES**

Mailing Address 2800 S SHIRLINGTON RD #950

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement  
PAC RENT

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.26691

Amount of Each Disbursement this Period

[REDACTED] 549.34

Memo Item

Full Name (Last, First, Middle Initial)

**C. AUTHORIZE.NET**

Mailing Address P.O. BOX 8999

City SAN FRANCISCO State CA Zip Code 94128

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.26688

Amount of Each Disbursement this Period

[REDACTED] 75.75

Memo Item

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

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

[REDACTED] 660.34

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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. BAUER, GARY, , ,**

Full Name (Last, First, Middle Initial)

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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB21B.26698

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. BB&T**

Full Name (Last, First, Middle Initial)

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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB21B.26684

Amount of Each Disbursement this Period: 71.50

Memo Item

**C. BB&T**

Full Name (Last, First, Middle Initial)

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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB21B.26688

Amount of Each Disbursement this Period: 7.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5079.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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**

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  
11 / 15 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26689  
Amount of Each Disbursement this Period  
3526.15

Memo Item

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  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26686  
Amount of Each Disbursement this Period  
71.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. 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  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26711  
Amount of Each Disbursement this Period  
1000.00

Memo Item

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

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

4597.65

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

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

FOR LINE NUMBER:  
(check only one)

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

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. COMCAST**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 3005

City SOUTHEASTERN State PA Zip Code 19398

Purpose of Disbursement PAC COMPUTER SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB21B.26693

Amount of Each Disbursement this Period: 263.00

Memo Item

**B. DEER PARK**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 52271

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement PAC OFFICE EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB21B.26712

Amount of Each Disbursement this Period: 43.22

Memo Item

**C. FEDERAL EXPRESS**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1140

City MEMPHIS State TN Zip Code 28101

Purpose of Disbursement PAC SHIPPING COSTS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB21B.26696

Amount of Each Disbursement this Period: 49.59

Memo Item

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

355.81

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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**

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  
PAC SHIPPING COSTS

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26713  
Amount of Each Disbursement this Period  
49.65

Memo Item

Full Name (Last, First, Middle Initial)

**B. FISCALNOTE, INC**

Mailing Address 1201 PENNSYLVANIA AVE FLOOR 6

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement  
PAC DUES & SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 31 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26708  
Amount of Each Disbursement this Period  
3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. FULFILLMENT SOLUTIONS INC**

Mailing Address 22880 GLEN DRIVE #120/160

City STERLING State VA Zip Code 20164

Purpose of Disbursement  
PAC DIRECT MAIL POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26714  
Amount of Each Disbursement this Period  
289.04

Memo Item

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

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

3338.69

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial)

**A. HELLER INFORMATION SERVICES**

Mailing Address 30 W GUDE DR, #220

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement  
PAC COMPUTER SERVICES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26702  
Amount of Each Disbursement this Period  
320.79

Memo Item

Full Name (Last, First, Middle Initial)

**B. IRON MOUNTAIN**

Mailing Address P.O. BOX 27128

City NEW YORK State NY Zip Code 10087

Purpose of Disbursement  
PAC STORAGE FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26715  
Amount of Each Disbursement this Period  
392.38

Memo Item

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) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26711  
Amount of Each Disbursement this Period  
1244.65

Memo Item

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

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

1957.82

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

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

FOR LINE NUMBER:  
(check only one)

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

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**

Full Name (Last, First, Middle Initial)

**A. 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  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26716  
Amount of Each Disbursement this Period  
412.15

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mailchimp**

Mailing Address 512 Means Street #404

City Atlanta State GA Zip Code 30318

Purpose of Disbursement  
PAC 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  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26700  
Amount of Each Disbursement this Period  
130.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MOELLER, BILL, , ,**

Mailing Address 2800 S SHIRLINGTON RD #930

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement  
PAC CONSULTING POLITICAL WRITER/RESEARCHER

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26692  
Amount of Each Disbursement this Period  
500.00

Memo Item

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

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

1042.15

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

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

FOR LINE NUMBER:  
(check only one)

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

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**

Full Name (Last, First, Middle Initial) <b>A. U.S. POSTMASTER</b>		Date of Disbursement MM / DD / YYYY 11 / 21 / 2018
Mailing Address 2850 S QUINCY ST		FEC Identification Number C [ ] <b>Transaction ID : SB21B.26701</b> Amount of Each Disbursement this Period [ ] 6.20
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement PAC POSTAGE		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Velezis, Dorie, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018
Mailing Address 2800 S Shirlington Rd #930		FEC Identification Number C [ ] <b>Transaction ID : SB21B.26695</b> Amount of Each Disbursement this Period [ ] 500.00
City Arlington	State VA	Zip Code 22206
Purpose of Disbursement PAC COMPLIANCE CONSULTING		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. VERIZON</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018
Mailing Address P.O. BOX 17577		FEC Identification Number C [ ] <b>Transaction ID : SB21B.26704</b> Amount of Each Disbursement this Period [ ] 591.82
City BALTIMORE	State MD	Zip Code 21297
Purpose of Disbursement PAC TELEPHONE		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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1098.02
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]



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

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

FOR LINE NUMBER: (check only one)

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

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**

Full Name (Last, First, Middle Initial)

**A. VERIZON**

Mailing Address P.O. BOX 17577

City BALTIMORE State MD Zip Code 21297

Purpose of Disbursement  
PAC TELEPHONE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26719  
Amount of Each Disbursement this Period  
578.52

Memo Item

Full Name (Last, First, Middle Initial)

**B. VIRAG, DEAN, , ,**

Mailing Address 14511 RILLHURST DR

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement  
PAC WEBSITE SUPPORT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26694  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
PAC CAGING AND 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  
10 / 31 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.26705  
Amount of Each Disbursement this Period  
431.04

Memo Item

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

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

1509.56

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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. WASHINGTON INTELLIGENCE BUREAU**

Full Name (Last, First, Middle Initial)

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement PAC CAGING AND DATA ENTRY SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB21B.26707

Amount of Each Disbursement this Period: 668.84

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	668.84
<b>TOTAL</b> This Period (last page this line number only).....▶	20307.88

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

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

FOR LINE NUMBER:  
(check only one)

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

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**

Full Name (Last, First, Middle Initial)  
**A. ANDY BARR FOR CONGRESS, INC., , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		19		2018

Mailing Address PO BOX 2059

FEC Identification Number

**C** HOKY06104

**Transaction ID : SB23.26642**

Amount of Each Disbursement this Period

2500.00

Memo Item

City LEXINGTON State KY Zip Code 40588

Purpose of Disbursement CONTRIBUTION

Candidate Name  
**BARR, GARLAND ANDY, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: KY District: 06

Full Name (Last, First, Middle Initial)  
**B. BLUM FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		19		2018

Mailing Address 2728 ASBURY ROAD SUITE 400

FEC Identification Number

**C** C00543926

**Transaction ID : SB23.26645**

Amount of Each Disbursement this Period

2500.00

Memo Item

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement CONTRIBUTION

Candidate Name  
**BLUM, RODNEY, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: IA District: 01

Full Name (Last, First, Middle Initial)  
**C. CAROL FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		19		2018

Mailing Address 1316 12TH STREET

FEC Identification Number

**C** C00653220

**Transaction ID : SB23.26647**

Amount of Each Disbursement this Period

2500.00

Memo Item

City HUNTINGTON State WV Zip Code 25701

Purpose of Disbursement CONTRIBUTION

Candidate Name  
**MILLER, CAROL DEVINE, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: WV District: 03

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

7500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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**

Full Name (Last, First, Middle Initial) <b>A. CATHY MCMORRIS RODGERS FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address BOX 137		FEC Identification Number C00390476 <b>Transaction ID : SB23.26651</b>
City SPOKANE	State WA	Zip Code 99210
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>MCMORRIS RODGERS, CATHY, , ,</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WA	District: 05	

Full Name (Last, First, Middle Initial) <b>B. CRESENT HARDY FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address PO BOX 753941		FEC Identification Number C00666461 <b>Transaction ID : SB23.26654</b>
City LAS VEGAS	State NV	Zip Code 89136
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>HARDY, CRESENT, , ,</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: NV	District: 04	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAVE BRAT INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address PO BOX 5094		FEC Identification Number C00554949 <b>Transaction ID : SB23.26657</b>
City GLEN ALLEN	State VA	Zip Code 23058
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>BRAT, DAVID ALAN MR., , ,</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: VA	District: 07	

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

7500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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**

Full Name (Last, First, Middle Initial) <b>A. GREG STEUBE CONGRESSIONAL COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address P O BOX 51957		FEC Identification Number C C00671891 <b>Transaction ID : SB23.26659</b>
City SARASOTA	State FL	Zip Code 34232
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>STEUBE, W. GREG, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 17	

Full Name (Last, First, Middle Initial) <b>B. KATIE ARRINGTON FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address PO BOX 80177		FEC Identification Number C C00653204 <b>Transaction ID : SB23.26662</b>
City CHARLESTON	State SC	Zip Code 29416
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>ARRINGTON, KATHERINE ELIZABETH, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: SC	District: 01	

Full Name (Last, First, Middle Initial) <b>C. MAST FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address PO BOX 3016		FEC Identification Number C C00632257 <b>Transaction ID : SB23.26663</b>
City STUART	State FL	Zip Code 34995
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>MAST, BRIAN, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 18	

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

7500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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**

Full Name (Last, First, Middle Initial) <b>A. MIKE BOST FOR CONGRESS COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address PO BOX 1212		FEC Identification Number C 000546499 <b>Transaction ID : SB23.26667</b>
City MURPHYSBORO	State IL	Zip Code 62966
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>BOST, MICHAEL, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IL	District: 12	

Full Name (Last, First, Middle Initial) <b>B. PETE STAUBER FOR CONGRESS VOLUNTEER COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address 23 CENTRAL ENTRANCE BOX 333		FEC Identification Number C 000650697 <b>Transaction ID : SB23.26671</b>
City DULUTH	State MN	Zip Code 55811
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>STAUBER, PETE, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MN	District: 08	

Full Name (Last, First, Middle Initial) <b>C. ROSKAM FOR CONGRESS COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address P. O. BOX 713		FEC Identification Number C 000410969 <b>Transaction ID : SB23.26675</b>
City WHEATON	State IL	Zip Code 60187
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>ROSKAM, PETER, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IL	District: 06	

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

7500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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. ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 10101 BLOOMINGDALE AVENUE  
SUITE 201

M M M	/	D D D	/	Y Y Y Y Y
10		19		2018

City RIVERVIEW State FL Zip Code 33578

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

C	C00676668
---	-----------

Candidate Name  
**SPANO, VINCENT ROSS, , ,**

Category/  
Type

**Transaction ID : SB23.26678**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: FL District: 15

2500.00
---------

Memo Item

**B. TARKANIAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3008 CAMPBELL CIRCLE

M M M	/	D D D	/	Y Y Y Y Y
10		19		2018

City LAS VEGAS State NV Zip Code 89107

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

C	C00654095
---	-----------

Candidate Name  
**TARKANIAN, DANNY, , ,**

Category/  
Type

**Transaction ID : SB23.26681**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: NV District: 03

2500.00
---------

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

--

Memo Item

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

5000.00
---------

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

35000.00
----------

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

**A.** Full Name (Last, First, Middle Initial)  
**ALLEN, SANDY, , ,**

Mailing Address **629 N ANDERSON**

City **ANGLETON** State **TX** Zip Code **77515**

Purpose of Disbursement  
**REFUND OF CONTRIBUTION**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2018**

FEC Identification Number  
**C**

**Transaction ID : SB28A.26641**

Amount of Each Disbursement this Period  
**250.00**

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

FEC Identification Number  
**C**

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

FEC Identification Number  
**C**

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>250.00</b>



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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 169 OF 174
	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 FOREST	State VA	Zip Code 24511	

Outstanding Balance Beginning This Period 2955.31	Transaction ID : SD10.4357	
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 GAITHERSBURG	State MD	Zip Code 20877	

Outstanding Balance Beginning This Period 223.11	Transaction ID : SD10.4359	
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>FISCALNOTE, INC</b>			Nature of Debt (Purpose): PAC DUES & SUBSCRIPTIONS
Mailing Address 1201 PENNSYLVANIA AVE FLOOR 6			
City WASHINGTON	State DC	Zip Code 20004	

Outstanding Balance Beginning This Period 3000.00	Transaction ID : SD10.26099	
Amount Incurred This Period 0.00	Payment This Period 3000.00	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 170 OF 174
	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 ELKRIDGE	State MD	Zip Code 21075	

Outstanding Balance Beginning This Period 2320.90	Transaction ID : SD10.4361	
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>STEPHENSON PRINTING INC</b>			Nature of Debt (Purpose): DIRECT MAIL POSTAGE
Mailing Address 5731 GENERAL WASHINGTON DRIVE			
City ALEXANDRIA	State VA	Zip Code 22312	

Outstanding Balance Beginning This Period 0.30	Transaction ID : SD10.16859	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>VERIZON</b>			Nature of Debt (Purpose): PAC TELEPHONE
Mailing Address P.O. BOX 17577			
City BALTIMORE	State MD	Zip Code 21297	

Outstanding Balance Beginning This Period 591.82	Transaction ID : SD10.26100	
Amount Incurred This Period 0.00	Payment This Period 591.82	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2321.20
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 171 OF 174
	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>VERIZON</b>		Nature of Debt (Purpose): PAC TELEPHONE	
Mailing Address P.O. BOX 17577			
City BALTIMORE	State MD	Zip Code 21297	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.26718	
Amount Incurred This Period 578.52	Payment This Period 578.52	Outstanding Balance at Close of This Period 0.00

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 CHANTILLY	State VA	Zip Code 20151	

Outstanding Balance Beginning This Period 431.04	Transaction ID : SD10.25548	
Amount Incurred This Period 0.00	Payment This Period 431.04	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 ENTRY SERVICES	
Mailing Address 4128 PEPSI PLACE			
City CHANTILLY	State VA	Zip Code 20151	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.26706	
Amount Incurred This Period 668.84	Payment This Period 668.84	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	5499.62
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) ▶	5499.62

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES
FEC IDENTIFICATION NUMBER
C C00325076

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

Full Name of Payee
CAPITOL RESOURCES, INC - CAMPAIGN HQ
Mailing Address P.O. BOX 257
City BROOKLYN State IA Zip Code 52211
Purpose of Expenditure PHONE CALLS LIVE AND ROBO
Category/Type 004
Name of Federal Candidate:
HANDEL, KAREN CHRISTINE, , ,
Support Oppose
Office Sought: House District: 06
President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought 4969.38
Disbursement For: Primary General 2018
Other (specify)

Full Name of Payee
CAPITOL RESOURCES, INC - CAMPAIGN HQ
Mailing Address P.O. BOX 257
City BROOKLYN State IA Zip Code 52211
Purpose of Expenditure PHONE CALLS LIVE
Category/Type 004
Name of Federal Candidate:
BARR, GARLAND ANDY, , ,
Support Oppose
Office Sought: House District: 06
President Senate State: KY
Calendar Year-To-Date Per Election for Office Sought 11640.00
Disbursement For: Primary General 2018
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 16609.38
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Velez, Dorie, , ,

[Electronically Filed]

Date 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES
FEC IDENTIFICATION NUMBER
C C00325076

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

Full Name of Payee
CAPITOL RESOURCES, INC - CAMPAIGN HQ
Mailing Address P.O. BOX 257
City BROOKLYN State IA Zip Code 52211
Purpose of Expenditure PHONE CALLS LIVE Category/Type 004
Name of Federal Candidate: HERRELL, STELLA YVETTE, , ,
Support Oppose Office Sought: House District: 02 State: NM
Calendar Year-To-Date Per Election for Office Sought 9769.92
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee
CAPITOL RESOURCES, INC - CAMPAIGN HQ
Mailing Address P.O. BOX 257
City BROOKLYN State IA Zip Code 52211
Purpose of Expenditure PHONE CALLS LIVE Category/Type 004
Name of Federal Candidate: ARRINGTON, KATHERINE ELIZABETH, , ,
Support Oppose Office Sought: House District: 01 State: SC
Calendar Year-To-Date Per Election for Office Sought 9215.52
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 18985.44
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Velez, Dorie, , ,

[Electronically Filed]

Date 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES
FEC IDENTIFICATION NUMBER
C C00325076

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

Full Name of Payee
CAPITOL RESOURCES, INC - CAMPAIGN HQ
Mailing Address
P.O. BOX 257
City
BROOKLYN State
IA Zip Code
52211
Purpose of Expenditure
PHONE CALLS LIVE Category/Type
004
Date of Public Distribution/Dissemination
11 / 01 / 2018
Amount
10060.32
Transaction ID : SE.26111
Date of Disbursement or Obligation
11 / 01 / 2018

Name of Federal Candidate:
RODGERS, CATHY MCMORRIS, ,
Support Oppose
Office Sought: House District: 05
President Senate State: WA
Calendar Year-To-Date
Per Election for Office Sought 10060.32
Disbursement For: Primary General
2018 Other (specify)

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support Oppose
Office Sought: House District:
President Senate State:
Calendar Year-To-Date
Per Election for Office Sought
Disbursement For: Primary General
Other (specify)

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures 10060.32
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 45655.14

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

Signature
Velez, Dorie, ,

[Electronically Filed]

Date
12 / 06 / 2018