

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

Office Use Only

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

12FE4M5

Committee for Working Families, Sponsored by Labor Organizations

ADDRESS (number and street)

555 Capitol Mall, Suite 400

Check if different
than previously
reported. (ACC)

Sacramento

CA

95814

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00626119

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

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

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

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

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

06

16

2026

in the
State of

CA

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

05

14

2026

through

M M M /

D D D /

Y Y Y Y Y Y

05

27

2026

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

Gonzalez Fletcher, Lorena, , ,

Signature of Treasurer

Gonzalez Fletcher, Lorena, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y

07

22

2026

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

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Committee for Working Families, Sponsored by Labor Organizations

Report Covering the Period: From: M M / D D / Y Y Y Y Y 05 / 14 / 2026 To: M M / D D / Y Y Y Y Y 05 / 27 / 2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2026		87809.05
(b) Cash on Hand at Beginning of Reporting Period.....	353834.23	
(c) Total Receipts (from Line 19)	80000.00	752517.57
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	433834.23	840326.62
7. Total Disbursements (from Line 31)	187635.82	594128.21
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	246198.41	246198.41
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	183249.18	



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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Committee for Working Families, Sponsored by Labor Organizations

Report Covering the Period:

From:

M M / D D / Y Y Y Y
05 14 2026

To:

M M / D D / Y Y Y Y
05 27 2026**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).....

30000.00

30000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

30000.00

30000.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

50000.00

722319.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

80000.00

752319.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

198.57

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))

80000.00

752517.57

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

80000.00

752517.57

DETAILED SUMMARY PAGE of Disbursements

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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	2000.00	8741.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2000.00	8741.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	185635.82	505387.21
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	80000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	80000.00
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)) ..	187635.82	594128.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	187635.82	594128.21

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	80000.00	752319.00
34. Total Contribution Refunds (from Line 28(d))	0.00	80000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	80000.00	672319.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2000.00	8741.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2000.00	8741.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3XA

Transaction ID :

Amending to add contribution.

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 7 OF 17

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

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

NAME OF COMMITTEE (In Full)

Committee for Working Families, Sponsored by Labor Organizations

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

A. County Employees Management Association

Mailing Address 1737 N First Street, Floor 3
Suite 370

City
San Jose

State
CA

Zip Code
95112

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 ▼

30000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2026

Transaction ID : IA1067

Amount of Each Receipt this Period

30000.00

☐ Memo Item

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

30000.00

30000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 17
(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee for Working Families, Sponsored by Labor Organizations

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

A. Dignity CA SEIU Local 2015

Mailing Address 2910 Beverly Blvd.

City
Los Angeles

State
CA

Zip Code
90057

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 ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2026

Transaction ID : IA1012

Amount of Each Receipt this Period

50000.00

☐ Memo Item

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

50000.00

50000.00

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Committee for Working Families, Sponsored by Labor Organizations

Full Name (Last, First, Middle Initial)

A. VR Research, Inc.

Mailing Address 4 Sunset Ln

City
BerkeleyState
CAZip Code
94708

Purpose of Disbursement

Research Services

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EB1020

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

2000.00

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

2000.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 10 OF 17

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Committee for Working Families, Sponsored by Labor Organizations

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

David Binder Research

Nature of Debt (Purpose):

Polling; In-Kind Contribution to 314 Action Fund (ID# C00633248)

Mailing Address 44 Page Street, Suite 404

City

San Francisco

State

CA

Zip Code

94102

Outstanding Balance Beginning This Period

35000.00

Transaction ID : PD1011

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

35000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Grindstone Field Solutions LLC

Nature of Debt (Purpose):

Website / Support Aisha Wahab

Mailing Address 2336 Haldis Way

City

Sacramento

State

CA

Zip Code

95822

Outstanding Balance Beginning This Period

1100.00

Transaction ID : PD988

Amount Incurred This Period

0.00

Payment This Period

1100.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LG Campaigns

Nature of Debt (Purpose):

Mailer/Support Aisha Wahab

Mailing Address 5201 Gilgunn Way

City

Sacramento

State

CA

Zip Code

95822

Outstanding Balance Beginning This Period

59578.57

Transaction ID : PD1001

Amount Incurred This Period

0.00

Payment This Period

59578.57

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

35000.00

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

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) 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 11 OF 17

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Committee for Working Families, Sponsored by Labor Organizations

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LG Campaigns

Nature of Debt (Purpose):

Mailer/Support Aisha Wahab

Mailing Address 5201 Gilgunn Way

City
SacramentoState
CAZip Code
95822

Outstanding Balance Beginning This Period

0.00

Transaction ID : PD1017

Amount Incurred This Period

59654.67

Payment This Period

0.00

Outstanding Balance at Close of This Period

59654.67

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LG Campaigns

Nature of Debt (Purpose):

Mailer/Support Aisha Wahab

Mailing Address 5201 Gilgunn Way

City
SacramentoState
CAZip Code
95822

Outstanding Balance Beginning This Period

0.00

Transaction ID : PD1014

Amount Incurred This Period

27765.94

Payment This Period

0.00

Outstanding Balance at Close of This Period

27765.94

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LG Campaigns

Nature of Debt (Purpose):

Graphic Design for Text Messages / Support
Aisha Wahab

Mailing Address 5201 Gilgunn Way

City
SacramentoState
CAZip Code
95822

Outstanding Balance Beginning This Period

0.00

Transaction ID : PD1019

Amount Incurred This Period

1250.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1250.00

1) SUBTOTALS This Period This Page (optional)..... ►

88670.61

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

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) 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 12 OF 17

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Committee for Working Families, Sponsored by Labor Organizations

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LG Campaigns

Nature of Debt (Purpose):

Mailer/Support Aisha Wahab

Mailing Address 5201 Gilgunn Way

City
SacramentoState
CAZip Code
95822

Outstanding Balance Beginning This Period

0.00

Transaction ID : PD1028

Amount Incurred This Period

59578.57

Payment This Period

0.00

Outstanding Balance at Close of This Period

59578.57

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

59578.57

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

183249.18

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

183249.18

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 13 OF 17
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Committee for Working Families, Sponsored by Labor Organizations			FEC IDENTIFICATION NUMBER ▼ C C00626119	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY				
Full Name of Payee Grindstone Field Solutions LLC ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 07 / 2026	
Mailing Address 2336 Haldis Way			Amount 1100.00	
City Sacramento	State CA	Zip Code 95822	Transaction ID : BE50 Date of Disbursement or Obligation MM / DD / YYYY 05 / 27 / 2026	
Purpose of Expenditure Website; actual for estimate reported on 5/8/26 48-hour report			Category/ Type 24E	
Name of Federal Candidate: Wahab, Aisha, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate District: 14 ☐ President State: CA	
Calendar Year-To-Date Per Election for Office Sought 488137.43			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Grindstone Field Solutions LLC ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 21 / 2026	
Mailing Address 2336 Haldis Way			Amount 15742.50	
City Sacramento	State CA	Zip Code 95822	Transaction ID : BE58 Date of Disbursement or Obligation MM / DD / YYYY 05 / 27 / 2026	
Purpose of Expenditure Text Messages and Website (5/21-6/2); actual amount for 24-hour report filed on 5/22			Category/ Type 24E	
Name of Federal Candidate: Wahab, Aisha, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate District: 14 ☐ President State: CA	
Calendar Year-To-Date Per Election for Office Sought 488137.43			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			16842.50	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Gonzalez Fletcher, Lorena, , ,			Date MM / DD / YYYY 07 / 22 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 14 OF 17
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Committee for Working Families, Sponsored by Labor Organizations		FEC IDENTIFICATION NUMBER ▼ C C00626119	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M M / D D D / Y Y Y Y Y Y			
Full Name of Payee LG Campaigns ☐ Memo Item		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 05 / 12 / 2026	
Mailing Address 5201 Gilgunn Way		Amount 59578.57	
City Sacramento	State CA	Zip Code 95822	Transaction ID : BE51 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 05 / 15 / 2026
Purpose of Expenditure Mailer disseminated 5/12/2026 and previously reported as debt; See Schedule D		Category/Type 24E	
Name of Federal Candidate: Wahab, Aisha, , , ☒ Support ☐ Oppose		Office Sought: ☒ House ☐ President ☐ Senate District: 14 State: CA	
Calendar Year-To-Date Per Election for Office Sought 488137.43		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee LG Campaigns ☐ Memo Item		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 05 / 14 / 2026	
Mailing Address 5201 Gilgunn Way		Amount 49636.18	
City Sacramento	State CA	Zip Code 95822	Transaction ID : BE52 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 05 / 15 / 2026
Purpose of Expenditure Mailer; actual amount for 24-hour report filed 5/1526		Category/Type 24E	
Name of Federal Candidate: Wahab, Aisha, , , ☒ Support ☐ Oppose		Office Sought: ☒ House ☐ President ☐ Senate District: 14 State: CA	
Calendar Year-To-Date Per Election for Office Sought 488137.43		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		109214.75	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Gonzalez Fletcher, Lorena, , ,</u>		Date M M M / D D D / Y Y Y Y Y Y 07 / 22 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 15 OF 17
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Committee for Working Families, Sponsored by Labor Organizations		FEC IDENTIFICATION NUMBER ▼ C C00626119										
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y												
Full Name of Payee LG Campaigns ☐ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 19 / 2026										
Mailing Address 5201 Gilgunn Way		Amount 59578.57 Transaction ID : XEALC187 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 20 / 2026										
<table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:40%;">City Sacramento</td><td style="width:20%;">State CA</td><td style="width:40%;">Zip Code 95822</td></tr></table>				City Sacramento	State CA	Zip Code 95822						
City Sacramento	State CA	Zip Code 95822										
Purpose of Expenditure Mailer; actual amount for 24-hour report filed 5/20/26		Category/ Type 24E										
Name of Federal Candidate: Wahab, Aisha, , , ☒ Support ☐ Oppose		Office Sought: ☒ House District: <u>14</u> ☐ President ☐ Senate State: <u>CA</u>										
Calendar Year-To-Date Per Election for Office Sought 488137.43		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶ _____										
Full Name of Payee LG Campaigns ☒ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 20 / 2026										
Mailing Address 5201 Gilgunn Way		Amount 27765.94 Transaction ID : BE54 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 20 / 2026										
<table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:40%;">City Sacramento</td><td style="width:20%;">State CA</td><td style="width:40%;">Zip Code 95822</td></tr></table>				City Sacramento	State CA	Zip Code 95822						
City Sacramento	State CA	Zip Code 95822										
Purpose of Expenditure Mailer; actual amount for 24-hour report filed 5/20/26		Category/ Type 24E										
Name of Federal Candidate: Wahab, Aisha, , , ☒ Support ☐ Oppose		Office Sought: ☒ House District: <u>14</u> ☐ President ☐ Senate State: <u>CA</u>										
Calendar Year-To-Date Per Election for Office Sought 488137.43		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶ _____										
<table style="width:100%;"><tr><td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td><td style="width:5%; text-align: center;">▶</td><td style="width:35%;"> 59578.57 </td></tr><tr><td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td><td style="text-align: center;">▶</td><td> </td></tr><tr><td>(c) TOTAL Independent Expenditures</td><td style="text-align: center;">▶</td><td> </td></tr></table>				(a) SUBTOTAL of Itemized Independent Expenditures	▶	59578.57	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶		(c) TOTAL Independent Expenditures	▶	
(a) SUBTOTAL of Itemized Independent Expenditures	▶	59578.57										
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶											
(c) TOTAL Independent Expenditures	▶											
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.												
Signature Gonzalez Fletcher, Lorena, , ,		Date M M / D D / Y Y Y Y Y Y 07 / 22 / 2026										

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 16 OF 17
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Committee for Working Families, Sponsored by Labor Organizations		FEC IDENTIFICATION NUMBER ▼ CC00626119	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M M / D D D / Y Y Y Y Y Y			
Full Name of Payee LG Campaigns		☒ Memo Item Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y	
Mailing Address 5201 Gilgunn Way		Amount 59654.67	
City Sacramento	State CA	Zip Code 95822	Transaction ID : BE57 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure Mailer; actual amount for 24-hour report filed 5/22/26		Category/ Type 24E	
Name of Federal Candidate: Wahab, Aisha, , ,		☒ Support Office Sought: ☒ House District: <u>14</u> ☐ Oppose ☐ President ☐ Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 488137.43 ☐ Other (specify) ▶	
Full Name of Payee LG Campaigns		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y	
Mailing Address 5201 Gilgunn Way		Amount 1250.00	
City Sacramento	State CA	Zip Code 95822	Transaction ID : BE59 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure Graphic Design for Text Messages; actual amount for 24-hour report filed 5/22/26		Category/ Type 24E	
Name of Federal Candidate: Wahab, Aisha, , ,		☒ Support Office Sought: ☒ House District: <u>14</u> ☐ Oppose ☐ President ☐ Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 488137.43 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Gonzalez Fletcher, Lorena, , ,		Date M M M / D D D / Y Y Y Y Y Y	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 17 OF 17
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Committee for Working Families, Sponsored by Labor Organizations			FEC IDENTIFICATION NUMBER ▼ C C00626119	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee LG Campaigns			☒ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 26 / 2026	
Mailing Address 5201 Gilgunn Way			Amount 59578.57	
City Sacramento	State CA	Zip Code 95822	Transaction ID : BE60 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 26 / 2026	
Purpose of Expenditure Mailer; actual amount for 24-hour report filed 5/27/26			Category/ Type 24E	
Name of Federal Candidate: Wahab, Aisha, , ,			☒ Support ☐ Oppose Office Sought: ☒ House District: 14 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought			488137.43 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee			☐ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address			Amount 	
City	State	Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure			Category/ Type	
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) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures			185635.82	
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 Gonzalez Fletcher, Lorena, , ,			Date M M / D D / Y Y Y Y Y Y 07 / 22 / 2026	