



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

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

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="2016"/>	<input type="text" value="330324.96"/>	<input type="text" value="330324.96"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="371288.87"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="198900.00"/>	<input type="text" value="243871.66"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="570188.87"/>	<input type="text" value="574196.62"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4765.65"/>	<input type="text" value="8773.40"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="565423.22"/>	<input type="text" value="565423.22"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="22118.88"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

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

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	117500.00	125300.00
(ii) Unitemized .....	400.00	500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	117900.00	125800.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	81000.00	118000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	198900.00	243800.00
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	71.66
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)).....▶	198900.00	243871.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	198900.00	243871.66

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	4765.65	8773.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4765.65	8773.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	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)) ..	4765.65	8773.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4765.65	8773.40

**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) .....	198900.00	243800.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	198900.00	243800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	4765.65	8773.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4765.65	8773.40

**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 11
<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)  
**Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO**

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

Mailing Address 840 Malcolm Road

City Burlingame	State CA	Zip Code 94010
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Law Offices of Cotchett, Pitre et al.	Occupation (for Individual) Attorney
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2016

**Transaction ID : INCA93**

Amount of Each Receipt this Period  
100000.00

Memo Item

**B. International Brotherhood of Electrical Workers Local No. 47**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 North Diamond Bard Blvd.

City Diamond Bar	State CA	Zip Code 91765
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2016

**Transaction ID : INCA80**

Amount of Each Receipt this Period  
15000.00

Memo Item

**C. Sprinkler Fitters Local No. 483**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2525 Barrington Court

City Hayward	State CA	Zip Code 94545
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2016

**Transaction ID : INCA95**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	117500.00
<b>TOTAL</b> This Period (last page this line number only).....	117500.00

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

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NAME OF COMMITTEE (In Full)  
**Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO**

**A. Amalgamated Transit Union Local 265 Political Action Committee**

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

Mailing Address 1590 La Pradera Drive

City Campbell	State CA	Zip Code 95008
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

**Transaction ID : INCA77**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. California Federation of Teachers COPE**

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

Mailing Address 2550 North Hollywood Way, Suite 40

City Burbank	State CA	Zip Code 91505
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2016

**Transaction ID : INCA79**

Amount of Each Receipt this Period  
25000.00

Memo Item

**C. IATSE Local 600 Political Action Committee**

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

Mailing Address 7755 West Sunset Blvd.

City Los Angeles	State CA	Zip Code 90046
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2016

**Transaction ID : INCA81**

Amount of Each Receipt this Period  
50000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO**

**A. Service Employees International Union Local 221 Independent Expenditure PAC**

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

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento	State CA	Zip Code 95814
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2016

**Transaction ID : INCA99**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. Theatrical Stage Employees Local 16 IATSE PAC**

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

Mailing Address 240 Second Street, First Floor

City San Francisco	State CA	Zip Code 94105
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2016

**Transaction ID : INCA96**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.**

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

Mailing Address

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	81000.00



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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

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

Mailing Address 555 Capitol Mall, Suite 1425

City  
Sacramento

State  
CA

Zip Code  
95814

Purpose of Disbursement  
Legal & Reporting Services

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			14			2016			

FEC Identification Number

C

Transaction ID : EXPB98

Amount of Each Disbursement this Period

4765.65

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	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

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

4765.65

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

4765.65

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Working America Coalition**

Mailing Address 815 16th Street, NW

City  
Washington

State  
DC

Zip Code  
20006

Purpose of Disbursement  
Lodging and Travel Expenses for Canvassing. 10/1/16-10/19/16

011

Category/  
Type

Candidate Name

**Working America Coalition**

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
10		19		2016

FEC Identification Number

C C00620583

**Transaction ID : NONB128**

Amount of Each Disbursement this Period

10166.90

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M 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

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)..... ▶

0.00

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

0.00

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 11
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>California Labor Federation, AFL-CIO</b>			Nature of Debt (Purpose): Lodging and Travel Expenses for Canvassing. 9/23/16-9/30/16
Mailing Address 600 Grand Avenue, Suite 410			
City Oakland	State CA	Zip Code 94565	

Outstanding Balance Beginning This Period 11951.98	Transaction ID : <b>PAYD60</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11951.98

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>California Labor Federation, AFL-CIO</b>			Nature of Debt (Purpose): Lodging and Travel Expenses for Canvassing. 10/1/16-10/19/16
Mailing Address 600 Grand Avenue, Suite 410			
City Oakland	State CA	Zip Code 94565	

Outstanding Balance Beginning This Period 0.00	Transaction ID : <b>PAYD97</b>	
Amount Incurred This Period 10166.90	Payment This Period 0.00	Outstanding Balance at Close of This Period 10166.90

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	Transaction ID :	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	22118.88
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	22118.88
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) ▶	22118.88