

# 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

Workers' Voice

ADDRESS (number and street) 815 - 16th Street, NW 7th Floor

Check if different than previously reported. (ACC) Washington DC 20006

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

C C00484287

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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 07 / 01 / 2015 through [MM] / [DD] / [YYYY] 12 / 31 / 2015

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 Ms. Elizabeth H Shuler

Signature of Treasurer Ms. Elizabeth H Shuler [Electronically Filed] Date 01 / 31 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Workers' Voice**

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="2015"/>	<input type="text" value="227774.82"/>	<input type="text" value="227774.82"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="243694.99"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="3167284.63"/>	<input type="text" value="4532521.65"/>
(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="3410979.62"/>	<input type="text" value="4760296.47"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3363233.67"/>	<input type="text" value="4712550.52"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="47745.95"/>	<input type="text" value="47745.95"/>
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="50055.51"/>	

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. 06/2004)

Page 3

Write or Type Committee Name

**Workers' Voice**

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).....	934652.14	2019652.14
(ii) Unitemized .....	190.00	185.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	934842.14	2019837.14
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	232397.48	432397.48
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1167239.62	2452234.62
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	61815.29
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2000045.01	2018471.74
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))..... ▶	3167284.63	4532521.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3167284.63	4532521.65

**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 .....	689650.66	1357054.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	689650.66	1357054.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	10000.00
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 (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	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 .....	2673583.01	3345496.01
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3363233.67	4712550.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3363233.67	4712550.52

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1167239.62	2452234.62
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1167239.62	2452234.62
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	689650.66	1357054.51
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	61815.29
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	689650.66	1295239.22

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

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

FOR LINE NUMBER: PAGE 6 OF 233  
(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)  
**Workers' Voice**

**A. AFL-CIO COPE Treasury**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 815 - 16th Street, NW  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1610300.66

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 31 / 2015  
**Transaction ID : C10343830**  
 Amount of Each Receipt this Period  
 5193.77  
 \* In-Kind: Non Federal Inkind Staff

**B. AFL-CIO COPE Treasury**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 815 - 16th Street, NW  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1610300.66

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 31 / 2015  
**Transaction ID : C10377354**  
 Amount of Each Receipt this Period  
 238.90  
 \* In-Kind: Non Federal Staff Expenses

**C. AFL-CIO COPE Treasury**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 815 - 16th Street, NW  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1610300.66

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 01 / 2015  
**Transaction ID : C10377005**  
 Amount of Each Receipt this Period  
 980.27  
 \* In-Kind: Non Federal In Kind Staff

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6412.94  
**TOTAL** 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: PAGE 7 OF 233  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)  
**A. AFL-CIO COPE Treasury**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1610300.66

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2015  
**Transaction ID : C10343816**

Amount of Each Receipt this Period  
1409.92

\* In-Kind: Non Federal Inkind Staff

Full Name (Last, First, Middle Initial)  
**B. AFL-CIO COPE Treasury**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1610300.66

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2015  
**Transaction ID : C10377353**

Amount of Each Receipt this Period  
238.90

\* In-Kind: Non Federal Staff Expenses

Full Name (Last, First, Middle Initial)  
**C. AFL-CIO COPE Treasury**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1610300.66

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2015  
**Transaction ID : C10377345**

Amount of Each Receipt this Period  
238.90

\* In-Kind: Non Federal Staff Expenses

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1887.72

**TOTAL** 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: PAGE 8 OF 233  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)  
**A. AFL-CIO COPE Treasury**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1610300.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2015  
**Transaction ID : C10376280**

Amount of Each Receipt this Period  
517000.00

Full Name (Last, First, Middle Initial)  
**B. AFSCME Indiana-Kentucky Organizing Committee 962 General Fund**

Mailing Address 1424 N. Pennsylvania Street

City Indianapolis State IN Zip Code 46202

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1474.16

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 14 / 2015  
**Transaction ID : C10343798**

Amount of Each Receipt this Period  
1474.16

\* In-Kind: Non Federal In Kind Staff

Full Name (Last, First, Middle Initial)  
**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
312116.92

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2015  
**Transaction ID : C10343799**

Amount of Each Receipt this Period  
73529.48

\* In-Kind: Non Federal In Kind Staff

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 592003.64

**TOTAL** 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 9 OF 233
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. AFSCME Special Account</b>		Date of Receipt
Mailing Address 1625 L Street, NW		MM / DD / YYYY 09 / 17 / 2015
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C	Transaction ID : <b>C10343817</b>	
Name of Employer	Occupation	Amount of Each Receipt this Period 5183.44
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312116.92	* In-Kind: Non Federal Inkind Staff

Full Name (Last, First, Middle Initial) <b>B. AFSCME Special Account</b>		Date of Receipt
Mailing Address 1625 L Street, NW		MM / DD / YYYY 10 / 05 / 2015
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C	Transaction ID : <b>C10328325</b>	
Name of Employer	Occupation	Amount of Each Receipt this Period 100000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312116.92	* In-Kind: Non Federal Canvassing Program

Full Name (Last, First, Middle Initial) <b>C. AFSCME Special Account</b>		Date of Receipt
Mailing Address 1625 L Street, NW		MM / DD / YYYY 10 / 07 / 2015
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C	Transaction ID : <b>C10328317</b>	
Name of Employer	Occupation	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312116.92	* In-Kind: Non Federal Voter Calls

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	105683.44
<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: PAGE 10 OF 233  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)  
**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
312116.92

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2015  
**Transaction ID : C10323569**

Amount of Each Receipt this Period  
4000.00

\* In-Kind: Non Federal Voter Calls

Full Name (Last, First, Middle Initial)  
**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
312116.92

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2015  
**Transaction ID : C10329226**

Amount of Each Receipt this Period  
3168.00

\* In-Kind: Non Federal Phonebank Survey

Full Name (Last, First, Middle Initial)  
**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
312116.92

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2015  
**Transaction ID : C10331837**

Amount of Each Receipt this Period  
4800.00

\* In-Kind: Non Federal Phonebank Survey

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11968.00

**TOTAL** 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: PAGE 11 OF 233  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

**A. AFSCME Special Account**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1625 L Street, NW  
 City Washington State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312116.92  
 Date of Receipt 11 / 03 / 2015  
**Transaction ID : C10339242**  
 Amount of Each Receipt this Period 100000.00  
 \* In-Kind: Non Federal Canvassing Program

**B. AFSCME Special Account**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1625 L Street, NW  
 City Washington State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312116.92  
 Date of Receipt 11 / 18 / 2015  
**Transaction ID : C10342384**  
 Amount of Each Receipt this Period 5856.00  
 \* In-Kind: Non Federal Survey Prep

**C. AFSCME Special Account**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1625 L Street, NW  
 City Washington State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312116.92  
 Date of Receipt 11 / 25 / 2015  
**Transaction ID : C10342380**  
 Amount of Each Receipt this Period 8800.00  
 \* In-Kind: Non Federal Persuasion VoterID Calls

**SUBTOTAL** of Receipts This Page (optional).....▶ 114656.00  
**TOTAL** 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: PAGE 12 OF 233  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)  
**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
312116.92

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2015  
**Transaction ID : C10343397**

Amount of Each Receipt this Period  
350.00

\* In-Kind: Non Federal Postage

Full Name (Last, First, Middle Initial)  
**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
312116.92

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 11 / 2015  
**Transaction ID : C10358814**

Amount of Each Receipt this Period  
5930.00

\* In-Kind: Non Federal In-Kind GOTV Calls

Full Name (Last, First, Middle Initial)  
**C. AFT Solidarity 527**

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
28946.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2015  
**Transaction ID : C10343800**

Amount of Each Receipt this Period  
3946.72

\* In-Kind: Non Federal In Kind Staff

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10226.72
<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: PAGE 13 OF 233  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)  
**A. AFT Solidarity 527**

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
28946.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : C10376745**

Amount of Each Receipt this Period  
25000.00

\* In-Kind: Non Federal Canvassing

Full Name (Last, First, Middle Initial)  
**B. Battleground Texas**

Mailing Address PO Box 11525

City Austin State TX Zip Code 78711

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : C10358812**

Amount of Each Receipt this Period  
7000.00

\* In-Kind: NonFed Paid Canvass

Full Name (Last, First, Middle Initial)  
**C. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4373.20

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2015

**Transaction ID : C10343803**

Amount of Each Receipt this Period  
1761.40

\* In-Kind: Non Federal In Kind Staff

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 33761.40

**TOTAL** 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 14 OF 233
	<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)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)  
**A. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4373.20

Date of Receipt  
10 / 02 / 2015  
**Transaction ID : C10343818**

Amount of Each Receipt this Period  
2611.80

\* In-Kind: Non Federal Inkind Staff

Full Name (Last, First, Middle Initial)  
**B. Greater Louisville Central Labor Council**

Mailing Address 1244 South Fourth Street

City Louisville State KY Zip Code 40203

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6403.96

Date of Receipt  
09 / 16 / 2015  
**Transaction ID : C10343804**

Amount of Each Receipt this Period  
6230.88

\* In-Kind: Non Federal In Kind Staff

Full Name (Last, First, Middle Initial)  
**C. Greater Louisville Central Labor Council**

Mailing Address 1244 South Fourth Street

City Louisville State KY Zip Code 40203

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6403.96

Date of Receipt  
10 / 03 / 2015  
**Transaction ID : C10343820**

Amount of Each Receipt this Period  
173.08

\* In-Kind: Non Federal Inkind Staff

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9015.76
<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 15 OF 233
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

**A. Harris County AFL-CIO Council**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2505 Sutherland  
 City Houston State TX Zip Code 77023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 14929.82

Date of Receipt  
 09 / 19 / 2015  
**Transaction ID : C10375440**  
 Amount of Each Receipt this Period  
 14386.90  
 \* In-Kind: Non Federal In Kind Staff

**B. Harris County AFL-CIO Council**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2505 Sutherland  
 City Houston State TX Zip Code 77023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 14929.82

Date of Receipt  
 12 / 07 / 2015  
**Transaction ID : C10343805**  
 Amount of Each Receipt this Period  
 542.92  
 \* In-Kind: Non Federal InKind Staff

**C. International Brotherhood of Electrical Workers Local 654 General Fund**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3729 Chichester Ave.  
 City Boothwyn State PA Zip Code 19061  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 670.08

Date of Receipt  
 10 / 19 / 2015  
**Transaction ID : C10343806**  
 Amount of Each Receipt this Period  
 670.08  
 \* In-Kind: Non Federal In Kind Staff

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15599.90
<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: PAGE 16 OF 233  
(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"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

**A. JCAESP/AFSCME Local 4011 General Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 4315 Preston Highway  
Suite 101

City State Zip Code  
Louisville KY 40213

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
295.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2015

**Transaction ID : C10343822**

Amount of Each Receipt this Period  
295.36

\* In-Kind: Non Federal Inkind Staff

**B. NCFO/SEIU 32BJ**

Full Name (Last, First, Middle Initial)  
Mailing Address 1212 Bath Ave  
Floor F&O

City State Zip Code  
Ashland KY 41101-2696

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

Name of Employer Occupation

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 / 19 / 2015

**Transaction ID : C10328364**

Amount of Each Receipt this Period  
5000.00

**C. Northeast Pennsylvania Area Labor Federation General Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 1258 O'Neill Hwy

City State Zip Code  
Scranton PA 18512

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5008.30

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 09 / 2015

**Transaction ID : C10343807**

Amount of Each Receipt this Period  
4836.37

\* In-Kind: Non Federal In Kind Staff

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10131.73

**TOTAL** 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 17 OF 233
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)  
**A. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton	State PA	Zip Code 18512
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5008.30

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

**Transaction ID : C10343832**

Amount of Each Receipt this Period  
171.93

\* In-Kind: Non Federal Inkind Staff

Full Name (Last, First, Middle Initial)  
**B. Northwestern PA Area Labor Federation**

Mailing Address 1276 Liberty Street

City Franklin	State PA	Zip Code 16323
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3798.49

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2015

**Transaction ID : C10343809**

Amount of Each Receipt this Period  
3348.84

\* In-Kind: Non Federal In Kind Staff

Full Name (Last, First, Middle Initial)  
**C. Northwestern PA Area Labor Federation**

Mailing Address 1276 Liberty Street

City Franklin	State PA	Zip Code 16323
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3798.49

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2015

**Transaction ID : C10343835**

Amount of Each Receipt this Period  
449.65

\* In-Kind: Non Federal Inkind Staff

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3970.42
<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 18 OF 233
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

**A. Ohio AFL-CIO General Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5577.00

Date of Receipt  
09 / 08 / 2015  
**Transaction ID : C10343810**

Amount of Each Receipt this Period  
5577.00

\* In-Kind: Non Federal In Kind Staff

**B. Philadelphia AFL-CIO Council General Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address c/o Pat Eiding  
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6906.27

Date of Receipt  
10 / 09 / 2015  
**Transaction ID : C10343811**

Amount of Each Receipt this Period  
6906.27

\* In-Kind: Non Federal In Kind Staff

**C. Planned Parenthood Texas Votes**

Full Name (Last, First, Middle Initial)  
Mailing Address 201 E Ben White Blvd Bldg B, Suite

City Austin State TX Zip Code 78704

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1030.44

Date of Receipt  
12 / 12 / 2015  
**Transaction ID : C10358806**

Amount of Each Receipt this Period  
1030.44

\* In-Kind: Non Federal In Kind Staff

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	13513.71
<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 19 OF 233
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)  
**A. SEIU PA State Council General Fund**

Mailing Address 1500 N. Second Street  
Suite 11

City Harrisburg State PA Zip Code 17102

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1509.31

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 03 / 2015  
**Transaction ID : C10344752**

Amount of Each Receipt this Period  
 1509.31

\* In-Kind: Nonfederal Inkind Staff

Full Name (Last, First, Middle Initial)  
**B. Southeastern Pennsylvania Area Labor Federation General Fund**

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4311.45

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 16 / 2015  
**Transaction ID : C10343813**

Amount of Each Receipt this Period  
 4311.45

\* In-Kind: Non Federal In Kind Staff

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5820.76
<b>TOTAL</b> This Period (last page this line number only).....▶	934652.14

**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 20 OF 233
<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)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)  
**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
199363.99

Date of Receipt: 10 / 09 / 2015  
**Transaction ID : C10343801**  
 Amount of Each Receipt this Period: 4921.02  
 \* In-Kind: Non Federal In Kind Staff

Full Name (Last, First, Middle Initial)  
**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
199363.99

Date of Receipt: 10 / 09 / 2015  
**Transaction ID : C10375441**  
 Amount of Each Receipt this Period: 24278.80  
 \* In-Kind: Non Federal Inkind Staff

Full Name (Last, First, Middle Initial)  
**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
199363.99

Date of Receipt: 10 / 13 / 2015  
**Transaction ID : C10323745**  
 Amount of Each Receipt this Period: 2500.00  
 \* In-Kind: Non Federal Printing

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	31699.82
<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 21 OF 233
<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)  
**Workers' Voice**

**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Full Name (Last, First, Middle Initial)  
Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
199363.99

Date of Receipt: 10 / 13 / 2015  
**Transaction ID : C10323747**  
 Amount of Each Receipt this Period: 2100.00  
 \* In-Kind: Non Federal Postage

**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Full Name (Last, First, Middle Initial)  
Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
199363.99

Date of Receipt: 10 / 27 / 2015  
**Transaction ID : C10343660**  
 Amount of Each Receipt this Period: 16027.74  
 \* In-Kind: Non Federal Printing

**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Full Name (Last, First, Middle Initial)  
Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
199363.99

Date of Receipt: 11 / 13 / 2015  
**Transaction ID : C10343666**  
 Amount of Each Receipt this Period: 985.00  
 \* In-Kind: Non Federal Printing

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	19112.74
<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 22 OF 233
<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

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)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)  
**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
199363.99

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2015

**Transaction ID : C10343670**

Amount of Each Receipt this Period  
40000.00

\* In-Kind: Non Federal Canvassing

Full Name (Last, First, Middle Initial)  
**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
199363.99

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2015

**Transaction ID : C10343686**

Amount of Each Receipt this Period  
60000.00

\* In-Kind: Non Federal Canvassing

Full Name (Last, First, Middle Initial)  
**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00488486

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
199363.99

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2015

**Transaction ID : C10343650**

Amount of Each Receipt this Period  
3055.67

\* In-Kind: Housing for Non Federal Canvassers

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	103055.67
<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 23 OF 233
<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)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)  
**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
199363.99

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 02 / 2015  
**Transaction ID : C10345224**

Amount of Each Receipt this Period  
 30000.00

\* In-Kind: Non Federal Canvassing

Full Name (Last, First, Middle Initial)  
**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00488486

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
199363.99

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2015  
**Transaction ID : C10358820**

Amount of Each Receipt this Period  
 15495.76

\* In-Kind: Non Federal Printing

Full Name (Last, First, Middle Initial)  
**C. COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Mailing Address 501 THIRD STREET, NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2015  
**Transaction ID : C10358817**

Amount of Each Receipt this Period  
 2150.00

\* In-Kind: Non Federal Pledge Cards

<b>SUBTOTAL</b> of Receipts This Page (optional).....	47645.76
<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 24 OF 233
<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)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)  
**A. UFCW Int'l Union Working Families Advocacy Project**

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

FEC ID number of contributing federal political committee. **C** C00484253

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
21763.55

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : C10343814**

Amount of Each Receipt this Period  
11428.46

\* In-Kind: Non Federal In Kind Staff

Full Name (Last, First, Middle Initial)  
**B. UFCW Int'l Union Working Families Advocacy Project**

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

FEC ID number of contributing federal political committee. **C** C00484253

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
21763.55

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2015

**Transaction ID : C10343825**

Amount of Each Receipt this Period  
10335.09

\* In-Kind: Non Federal Inkind Staff

Full Name (Last, First, Middle Initial)  
**C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Mailing Address 80 F STREET NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00512293

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
9119.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : C10343828**

Amount of Each Receipt this Period  
3640.97

\* In-Kind: Non Federal Inkind Staff

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25404.52
<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 25 OF 233
<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)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)  
**A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Mailing Address 80 F STREET NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00512293

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 9119.94

Date of Receipt: 10 / 09 / 2015  
**Transaction ID : C10343815**  
 Amount of Each Receipt this Period: 4252.24  
 \* In-Kind: Non Federal In Kind Staff

Full Name (Last, First, Middle Initial)  
**B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Mailing Address 80 F STREET NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00512293

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 9119.94

Date of Receipt: 10 / 17 / 2015  
**Transaction ID : C10343837**  
 Amount of Each Receipt this Period: 1226.73  
 \* In-Kind: Non Federal Inkind Staff

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt: / /

Amount of Each Receipt this Period:

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5478.97
<b>TOTAL</b> This Period (last page this line number only).....▶	232397.48

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

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

FOR LINE NUMBER: PAGE 26 OF 233  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

**A. AFL-CIO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 815 16th Street NW  
 City Washington State DC Zip Code 20006-4101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2015  
**Transaction ID : C10375685**  
 Amount of Each Receipt this Period  
 2000000.00

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 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

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2000000.00

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)  
**A. AFL-CIO**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement Reimbursement for Network Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 09 / 2015

Transaction ID : **D576039**

Amount of Each Disbursement this Period: 2250.00

Category/Type

Full Name (Last, First, Middle Initial)  
**B. AFL-CIO**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement Reimbursement for Staff Related Costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 09 / 2015

Transaction ID : **D576040**

Amount of Each Disbursement this Period: 13074.63

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**C. AFL-CIO**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement Reimbursement for Staff Related Costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 09 / 2015

Transaction ID : **D576041**

Amount of Each Disbursement this Period: 13729.78

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 29054.41

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFL-CIO**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Reimbursement for Network Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D578576**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. AFL-CIO**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Reimbursement for Network Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D579015**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. AFL-CIO**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Reimbursement for Network Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D580291**

Amount of Each Disbursement this Period

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

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFL-CIO**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Reimbursement for Network Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

**Transaction ID : D580292**

Amount of Each Disbursement this Period

2250.00

Full Name (Last, First, Middle Initial)

**B. AFL-CIO**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Reimbursement for Staff Related Costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 13 / 2015

**Transaction ID : D581661**

Amount of Each Disbursement this Period

10079.73

Full Name (Last, First, Middle Initial)

**C. AFL-CIO**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Reimbursement for Staff Related Costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 13 / 2015

**Transaction ID : D581662**

Amount of Each Disbursement this Period

156022.68

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

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

168352.41

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFL-CIO**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Reimbursement for Staff Related Costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D581749**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. AFL-CIO**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Reimbursement for Staff Related Costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D581771**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. AFL-CIO**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Reimbursement for Network Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D584729**

Amount of Each Disbursement this Period

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

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Calibre CPA Group, PLLC**

Mailing Address 1850 K Street, NW #1050

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Audit Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D577306**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Calibre CPA Group, PLLC**

Mailing Address 1850 K Street, NW #1050

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Audit Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D575590**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Calibre CPA Group, PLLC**

Mailing Address 1850 K Street, NW #1050

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Audit Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D578575**

Amount of Each Disbursement this Period

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Evans & Katz, LLC**

Mailing Address P. O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement  
Compliance Services

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

**Transaction ID : D578797**

Amount of Each Disbursement this Period

279.45

Full Name (Last, First, Middle Initial)

**B. Evans & Katz, LLC**

Mailing Address P. O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement  
Compliance Services

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 23 / 2015

**Transaction ID : D577305**

Amount of Each Disbursement this Period

1261.60

Full Name (Last, First, Middle Initial)

**C. Evans & Katz, LLC**

Mailing Address P. O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement  
Compliance Services

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 06 / 2015

**Transaction ID : D575020**

Amount of Each Disbursement this Period

818.10

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

2359.15

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Evans & Katz, LLC**

Mailing Address P. O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement  
Compliance Services

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

Transaction ID : D579212

Amount of Each Disbursement this Period

517.05

Full Name (Last, First, Middle Initial)

**B. Evans & Katz, LLC**

Mailing Address P. O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement  
Compliance Services

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2015

Transaction ID : D580289

Amount of Each Disbursement this Period

1296.08

Full Name (Last, First, Middle Initial)

**C. Evans & Katz, LLC**

Mailing Address P. O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement  
Compliance Services

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2015

Transaction ID : D584370

Amount of Each Disbursement this Period

2233.95

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

4047.08

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Evans & Katz, LLC**

Mailing Address P. O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement  
Compliance Services

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 01 / 2015

Transaction ID : D584371

Amount of Each Disbursement this Period

1506.15

Full Name (Last, First, Middle Initial)

**B. Ms. Kimberly C. Farrell**

Mailing Address 1622 Old Town Rd

City Edgewater State MD Zip Code 21037

Purpose of Disbursement  
Compliance Consulting

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 06 / 2015

Transaction ID : D578465

Amount of Each Disbursement this Period

360.00

Full Name (Last, First, Middle Initial)

**C. NGP VAN, INC.**

Mailing Address 1225 Eye Street, NW  
Suite 1225

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Software and Support

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

Transaction ID : D578796

Amount of Each Disbursement this Period

1200.00

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

3066.15

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. NGP VAN, INC.**

Mailing Address 1225 Eye Street, NW  
Suite 1225

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Software and Support

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D580422**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. NGP VAN, INC.**

Mailing Address 1225 Eye Street, NW  
Suite 1225

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Software and Support

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D584382**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Colleen M. O'Neill-Yanchulis**

Mailing Address 283 College Manor Drive

City Arnold State MD Zip Code 21012

Purpose of Disbursement  
Media Production Fliers

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D584381**

Amount of Each Disbursement this Period

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

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. The Atlas Project, Inc.**

Mailing Address 888 16th Street, NW #333

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Research Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D584384**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Trilogy Interactive, LLC**

Mailing Address PO Box 4177

City Mountain View State CA Zip Code 94040-4177

Purpose of Disbursement  
Auditing Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D578599**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Trilogy Interactive, LLC**

Mailing Address PO Box 4177

City Mountain View State CA Zip Code 94040-4177

Purpose of Disbursement  
Auditing Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D575432**

Amount of Each Disbursement this Period

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Trilogy Interactive, LLC**

Mailing Address PO Box 4177

City Mountain View State CA Zip Code 94040-4177

Purpose of Disbursement Auditing Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2015

**Transaction ID : D577304**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**B. Trister, Ross, Schadler & Gold, PLLC**

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 06 / 2015

**Transaction ID : D575453**

Amount of Each Disbursement this Period

4321.26

Full Name (Last, First, Middle Initial)

**C. Trister, Ross, Schadler & Gold, PLLC**

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 06 / 2015

**Transaction ID : D575151**

Amount of Each Disbursement this Period

7754.94

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

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

22076.20

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Trister, Ross, Schadler & Gold, PLLC**

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 02 / 2015

**Transaction ID : D578574**

Amount of Each Disbursement this Period: 1438.37

Category/Type: 001

Full Name (Last, First, Middle Initial)

**B. Trister, Ross, Schadler & Gold, PLLC**

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 01 / 2015

**Transaction ID : D578795**

Amount of Each Disbursement this Period: 796.90

Category/Type: 001

Full Name (Last, First, Middle Initial)

**C. Trister, Ross, Schadler & Gold, PLLC**

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 20 / 2015

**Transaction ID : D580423**

Amount of Each Disbursement this Period: 1923.90

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4159.17

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Trister, Ross, Schadler & Gold, PLLC**

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Legal Services

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 21 / 2015

Transaction ID : D584377

Amount of Each Disbursement this Period

4942.50

Full Name (Last, First, Middle Initial)

**B. Trister, Ross, Schadler & Gold, PLLC**

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Legal Services

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 23 / 2015

Transaction ID : D584378

Amount of Each Disbursement this Period

2042.50

Full Name (Last, First, Middle Initial)

**C. Trister, Ross, Schadler & Gold, PLLC**

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Legal Services

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 23 / 2015

Transaction ID : D584379

Amount of Each Disbursement this Period

6226.83

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

13211.83

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

689575.59

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFL-CIO COPE Treasury**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2015

**Transaction ID : D581247**

Amount of Each Disbursement this Period

1470.79

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFL-CIO COPE Treasury**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

**AFL-CIO COPE Treasury**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2015

**Transaction ID : D581248**

Amount of Each Disbursement this Period

980.27

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFL-CIO COPE Treasury**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Non Federal Staff Expenses

001

Category/  
Type

Candidate Name

**AFL-CIO COPE Treasury**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2015

**Transaction ID : D581193**

Amount of Each Disbursement this Period

238.90

\* In-Kind

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

2689.96

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. AFL-CIO COPE Treasury</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2015
Mailing Address 815 - 16th Street, NW		<b>Transaction ID : D581194</b>
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Non Federal Inkind Staff-PA	Amount of Each Disbursement this Period 428.25
Candidate Name	Category/Type 001	* In-Kind
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:		

Full Name (Last, First, Middle Initial) <b>B. AFL-CIO COPE Treasury</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2015
Mailing Address 815 - 16th Street, NW		<b>Transaction ID : D581331</b>
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Non Federal Inkind Staff-PA	Amount of Each Disbursement this Period 1546.19
Candidate Name	Category/Type 001	* In-Kind
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:		

Full Name (Last, First, Middle Initial) <b>C. AFL-CIO COPE Treasury</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2015
Mailing Address 815 - 16th Street, NW		<b>Transaction ID : D581332</b>
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Non Federal Staff Expenses	Amount of Each Disbursement this Period 238.90
Candidate Name <b>AFL-CIO COPE Treasury</b>	Category/Type 001	* In-Kind
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2213.34
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFL-CIO COPE Treasury**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2015

**Transaction ID : D581333**

Amount of Each Disbursement this Period

704.96

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFL-CIO COPE Treasury**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2015

**Transaction ID : D581393**

Amount of Each Disbursement this Period

1748.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFL-CIO COPE Treasury**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2015

**Transaction ID : D581394**

Amount of Each Disbursement this Period

704.96

\* In-Kind

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

3158.46

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFL-CIO COPE Treasury**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Non Federal Staff Expenses

001

Candidate Name

**AFL-CIO COPE Treasury**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2015

**Transaction ID : D581395**

Amount of Each Disbursement this Period

238.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFL-CIO**

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Non-Contribution Refund

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 Y Y  
12 / 01 / 2015

**Transaction ID : D584733**

Amount of Each Disbursement this Period

2000000.00

Full Name (Last, First, Middle Initial)

**C. AFSCME Indiana-Kentucky Organizing Committee 962 General Fund**

Mailing Address 1424 N. Pennsylvania Street

City Indianapolis State IN Zip Code 46202

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2015

**Transaction ID : D581405**

Amount of Each Disbursement this Period

184.27

\* In-Kind

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

2000423.17

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Indiana-Kentucky Organizing Committee 962 General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2015

Mailing Address 1424 N. Pennsylvania Street

City Indianapolis State IN Zip Code 46202

**Transaction ID : D580912**

Purpose of Disbursement  
Non Federal In Kind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

368.54
--------

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. AFSCME Indiana-Kentucky Organizing Committee 962 General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2015

Mailing Address 1424 N. Pennsylvania Street

City Indianapolis State IN Zip Code 46202

**Transaction ID : D580558**

Purpose of Disbursement  
Non Federal In Kind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

368.54
--------

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. AFSCME Indiana-Kentucky Organizing Committee 962 General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		02		2015

Mailing Address 1424 N. Pennsylvania Street

City Indianapolis State IN Zip Code 46202

**Transaction ID : D579708**

Purpose of Disbursement  
Non Federal In Kind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

368.54
--------

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

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

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

1105.62
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Indiana-Kentucky Organizing Committee 962 General Fund**

Mailing Address 1424 N. Pennsylvania Street

City Indianapolis State IN Zip Code 46202

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2015

Transaction ID : D579044

Amount of Each Disbursement this Period

184.27

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2015

Transaction ID : D579045

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2015

Transaction ID : D579042

Amount of Each Disbursement this Period

230.12

\* In-Kind

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

1312.29

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

Transaction ID : D579111

Amount of Each Disbursement this Period

230.12

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2015

Transaction ID : D578978

Amount of Each Disbursement this Period

334.85

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 11 / 2015

Transaction ID : D578967

Amount of Each Disbursement this Period

897.90

\* In-Kind

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

1462.87

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 11 / 2015

**Transaction ID : D578968**

Amount of Each Disbursement this Period

460.24

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2015

**Transaction ID : D578862**

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2015

**Transaction ID : D578863**

Amount of Each Disbursement this Period

897.90

\* In-Kind

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

2256.04

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2015

**Transaction ID : D578928**

Amount of Each Disbursement this Period

334.85

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2015

**Transaction ID : D578929**

Amount of Each Disbursement this Period

616.37

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2015

**Transaction ID : D578930**

Amount of Each Disbursement this Period

897.90

\* In-Kind

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

1849.12

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2015

Transaction ID : D578931

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2015

Transaction ID : D578932

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2015

Transaction ID : D578933

Amount of Each Disbursement this Period

897.90

\* In-Kind

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

2693.70

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 09 / 08 / 2015
Mailing Address 1625 L Street, NW		<b>Transaction ID : D578859</b>
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 616.37
Candidate Name	Category/Type 001	* In-Kind
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:		

Full Name (Last, First, Middle Initial) <b>B. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2015
Mailing Address 1625 L Street, NW		<b>Transaction ID : D578860</b>
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 897.90
Candidate Name	Category/Type 001	* In-Kind
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:		

Full Name (Last, First, Middle Initial) <b>C. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 09 / 06 / 2015
Mailing Address 1625 L Street, NW		<b>Transaction ID : D578826</b>
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 897.90
Candidate Name	Category/Type 001	* In-Kind
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:		

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

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

2412.17

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 07 / 2015

Transaction ID : D578827

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 05 / 2015

Transaction ID : D578828

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 08 / 2015

Transaction ID : D578887

Amount of Each Disbursement this Period

616.37

\* In-Kind

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

2412.17

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D578888**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D578889**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D578890**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2015

**Transaction ID : D578891**

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Inkind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 21 / 2015

**Transaction ID : D579249**

Amount of Each Disbursement this Period

281.52

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 21 / 2015

**Transaction ID : D579250**

Amount of Each Disbursement this Period

281.52

\* In-Kind

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

1460.94

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2015

**Transaction ID : D579145**

Amount of Each Disbursement this Period

230.12

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Inkind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 19 / 2015

**Transaction ID : D579175**

Amount of Each Disbursement this Period

563.05

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

**Transaction ID : D579113**

Amount of Each Disbursement this Period

897.90

\* In-Kind

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

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

1691.07

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2015

Transaction ID : D579131

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2015

Transaction ID : D579139

Amount of Each Disbursement this Period

448.95

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2015

Transaction ID : D579142

Amount of Each Disbursement this Period

167.43

\* In-Kind

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

1514.28

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2015

**Transaction ID : D579158**

Amount of Each Disbursement this Period

230.12

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2015

**Transaction ID : D579159**

Amount of Each Disbursement this Period

281.52

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 22 / 2015

**Transaction ID : D579277**

Amount of Each Disbursement this Period

374.43

\* In-Kind

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

886.07

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2015

**Transaction ID : D579281**

Amount of Each Disbursement this Period

522.06

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2015

**Transaction ID : D579309**

Amount of Each Disbursement this Period

230.12

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2015

**Transaction ID : D579311**

Amount of Each Disbursement this Period

897.90

\* In-Kind

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

1650.08

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 24 / 2015

Transaction ID : D579320

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2015

Transaction ID : D579331

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2015

Transaction ID : D579335

Amount of Each Disbursement this Period

230.12

\* In-Kind

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

2025.92

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2015

**Transaction ID : D579590**

Amount of Each Disbursement this Period

616.37

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2015

**Transaction ID : D579628**

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2015

**Transaction ID : D579709**

Amount of Each Disbursement this Period

281.52

\* In-Kind

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

1795.79

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D579712**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D579663**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D579690**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D579693**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D579735**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D579738**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2015

**Transaction ID : D579755**

Amount of Each Disbursement this Period

460.24

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2015

**Transaction ID : D579779**

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2015

**Transaction ID : D580346**

Amount of Each Disbursement this Period

334.85

\* In-Kind

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

1692.99

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 10 / 13 / 2015
Mailing Address 1625 L Street, NW		Transaction ID : <b>D580347</b>  Amount of Each Disbursement this Period 460.24  * In-Kind
City Washington	State DC	
Zip Code 20036	Category/Type 001	
Purpose of Disbursement Non Federal In Kind Staff	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:		

Full Name (Last, First, Middle Initial) <b>B. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2015
Mailing Address 1625 L Street, NW		Transaction ID : <b>D580281</b>  Amount of Each Disbursement this Period 460.24  * In-Kind
City Washington	State DC	
Zip Code 20036	Category/Type 001	
Purpose of Disbursement Non Federal In Kind Staff	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:		

Full Name (Last, First, Middle Initial) <b>C. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2015
Mailing Address 1625 L Street, NW		Transaction ID : <b>D580282</b>  Amount of Each Disbursement this Period 334.85  * In-Kind
City Washington	State DC	
Zip Code 20036	Category/Type 001	
Purpose of Disbursement Non Federal In Kind Staff	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1255.33
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2015
Mailing Address 1625 L Street, NW		<b>Transaction ID : D579911</b>
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 334.85
Candidate Name	Category/ Type 001	* In-Kind
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:		

Full Name (Last, First, Middle Initial) <b>B. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 10 / 09 / 2015
Mailing Address 1625 L Street, NW		<b>Transaction ID : D580050</b>
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 460.24
Candidate Name	Category/ Type 001	* In-Kind
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:		

Full Name (Last, First, Middle Initial) <b>C. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 10 / 09 / 2015
Mailing Address 1625 L Street, NW		<b>Transaction ID : D580051</b>
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 334.85
Candidate Name	Category/ Type 001	* In-Kind
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	1129.94
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D580559**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Inkind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D580561**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D580589**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

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 Y Y  
10 / 16 / 2015

**Transaction ID : D580519**

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

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 Y Y  
10 / 17 / 2015

**Transaction ID : D580549**

Amount of Each Disbursement this Period

460.24

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

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 Y Y  
10 / 14 / 2015

**Transaction ID : D580469**

Amount of Each Disbursement this Period

334.85

\* In-Kind

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

1692.99

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2015

**Transaction ID : D580491**

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2015

**Transaction ID : D580496**

Amount of Each Disbursement this Period

230.12

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 23 / 2015

**Transaction ID : D580905**

Amount of Each Disbursement this Period

460.24

\* In-Kind

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

1588.26

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 23 / 2015

**Transaction ID : D580906**

Amount of Each Disbursement this Period

616.37

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 24 / 2015

**Transaction ID : D580953**

Amount of Each Disbursement this Period

616.37

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 24 / 2015

**Transaction ID : D580954**

Amount of Each Disbursement this Period

460.24

\* In-Kind

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

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

1692.98

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
10 / 20 / 2015

**Transaction ID : D580644**

Amount of Each Disbursement this Period

230.12

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
10 / 20 / 2015

**Transaction ID : D580651**

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
10 / 21 / 2015

**Transaction ID : D580827**

Amount of Each Disbursement this Period

460.24

\* In-Kind

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

1588.26

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
10 / 21 / 2015

**Transaction ID : D580828**

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
10 / 22 / 2015

**Transaction ID : D580878**

Amount of Each Disbursement this Period

460.24

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
10 / 22 / 2015

**Transaction ID : D580879**

Amount of Each Disbursement this Period

897.90

\* In-Kind

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

2256.04

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D580972

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D580973

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D581059

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2015

**Transaction ID : D581060**

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2015

**Transaction ID : D581089**

Amount of Each Disbursement this Period

248.40

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2015

**Transaction ID : D581090**

Amount of Each Disbursement this Period

460.24

\* In-Kind

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

1606.54

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
10 / 28 / 2015

**Transaction ID : D581091**

Amount of Each Disbursement this Period

616.37

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
10 / 29 / 2015

**Transaction ID : D581114**

Amount of Each Disbursement this Period

460.24

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Inkind Staff

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 Y Y  
10 / 29 / 2015

**Transaction ID : D581115**

Amount of Each Disbursement this Period

415.83

\* In-Kind

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

1492.44

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2015
Mailing Address 1625 L Street, NW		<b>Transaction ID : D581116</b>
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 730.48
Candidate Name	Category/Type 001	* In-Kind
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:		

Full Name (Last, First, Middle Initial) <b>B. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 11 / 23 / 2015
Mailing Address 1625 L Street, NW		<b>Transaction ID : D582035</b>
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 460.24
Candidate Name	Category/Type 001	* In-Kind
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:		

Full Name (Last, First, Middle Initial) <b>C. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 11 / 11 / 2015
Mailing Address 1625 L Street, NW		<b>Transaction ID : D582036</b>
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 460.24
Candidate Name	Category/Type 001	* In-Kind
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	1650.96
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 20 / 2015

Transaction ID : D582039

Amount of Each Disbursement this Period

460.24

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 18 / 2015

Transaction ID : D582040

Amount of Each Disbursement this Period

460.24

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 24 / 2015

Transaction ID : D582043

Amount of Each Disbursement this Period

460.24

\* In-Kind

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

1380.72

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
11 / 12 / 2015

**Transaction ID : D582044**

Amount of Each Disbursement this Period

460.24

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
11 / 21 / 2015

**Transaction ID : D582047**

Amount of Each Disbursement this Period

1150.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
11 / 19 / 2015

**Transaction ID : D582048**

Amount of Each Disbursement this Period

805.39

\* In-Kind

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

2416.17

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2015

**Transaction ID : D582033**

Amount of Each Disbursement this Period

1150.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2015

**Transaction ID : D582051**

Amount of Each Disbursement this Period

805.39

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2015

**Transaction ID : D582053**

Amount of Each Disbursement this Period

805.39

\* In-Kind

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

2761.32

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D582055**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D582057**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D582295**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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  
11 / 30 / 2015

Transaction ID : D582297

Amount of Each Disbursement this Period

460.24

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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  
12 / 02 / 2015

Transaction ID : D582298

Amount of Each Disbursement this Period

805.39

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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  
12 / 03 / 2015

Transaction ID : D582328

Amount of Each Disbursement this Period

805.39

\* In-Kind

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

2071.02

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			12			2015			

**Transaction ID : D583559**

Amount of Each Disbursement this Period

1150.54
---------

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			07			2015			

**Transaction ID : D583562**

Amount of Each Disbursement this Period

805.39
--------

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			04			2015			

**Transaction ID : D583565**

Amount of Each Disbursement this Period

805.39
--------

\* In-Kind

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

2761.32
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D583568**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D583569**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D583574**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
12 / 09 / 2015

**Transaction ID : D583575**

Amount of Each Disbursement this Period

805.39

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
12 / 05 / 2015

**Transaction ID : D583572**

Amount of Each Disbursement this Period

1150.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
In-Kind Non Federal GOTV Calls

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 Y Y  
12 / 11 / 2015

**Transaction ID : D584356**

Amount of Each Disbursement this Period

5930.00

\* In-Kind

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

7885.93

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
In-Kind Non Federal Postage

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2015

**Transaction ID : D584357**

Amount of Each Disbursement this Period

350.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 03 / 2015

**Transaction ID : D581396**

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Inkind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 03 / 2015

**Transaction ID : D581397**

Amount of Each Disbursement this Period

1566.85

\* In-Kind

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

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

2814.75

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2015
Mailing Address 1625 L Street, NW		<b>Transaction ID : D581398</b>
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 460.24
Candidate Name	Category/ Type 001	* In-Kind
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:		

Full Name (Last, First, Middle Initial) <b>B. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2015
Mailing Address 1625 L Street, NW		<b>Transaction ID : D581334</b>
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal Inkind Staff	Amount of Each Disbursement this Period 261.32
Candidate Name	Category/ Type 001	* In-Kind
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:		

Full Name (Last, First, Middle Initial) <b>C. AFSCME Special Account</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2015
Mailing Address 1625 L Street, NW		<b>Transaction ID : D581335</b>
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 460.24
Candidate Name	Category/ Type 001	* In-Kind
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:		

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

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

1181.80

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2015

**Transaction ID : D581336**

Amount of Each Disbursement this Period

2203.43

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2015

**Transaction ID : D581195**

Amount of Each Disbursement this Period

379.06

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2015

**Transaction ID : D581249**

Amount of Each Disbursement this Period

563.05

\* In-Kind

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

3145.54

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2015

**Transaction ID : D581250**

Amount of Each Disbursement this Period

509.72

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2015

**Transaction ID : D581251**

Amount of Each Disbursement this Period

230.12

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

**Transaction ID : D581145**

Amount of Each Disbursement this Period

460.24

\* In-Kind

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

1200.08

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2015

**Transaction ID : D581146**

Amount of Each Disbursement this Period

897.90

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2015

**Transaction ID : D581147**

Amount of Each Disbursement this Period

248.40

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Canvassing Program

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2015

**Transaction ID : D584665**

Amount of Each Disbursement this Period

100000.00

\* In-Kind

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

101146.30

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Voter Calls

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2015

**Transaction ID : D584648**

Amount of Each Disbursement this Period

4000.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Voter Calls

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2015

**Transaction ID : D584649**

Amount of Each Disbursement this Period

500.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Canvassing Program

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2015

**Transaction ID : D584650**

Amount of Each Disbursement this Period

100000.00

\* In-Kind

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

104500.00

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Phonebank Survey

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D584651**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Phonebank Survey

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D584652**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Persuasion Calls

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D584653**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFSCME Special Account**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Non Federal Survey Prep

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D584654**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFT Solidarity 527**

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Canvassing

Category/  
Type

Candidate Name

**AFT Solidarity**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D584730**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFT Solidarity 527**

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D581148**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFT Solidarity 527**

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2015

**Transaction ID : D581266**

Amount of Each Disbursement this Period

493.34

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFT Solidarity 527**

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2015

**Transaction ID : D581338**

Amount of Each Disbursement this Period

493.34

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFT Solidarity 527**

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 03 / 2015

**Transaction ID : D581400**

Amount of Each Disbursement this Period

493.34

\* In-Kind

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

1480.02

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFT Solidarity 527**

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D581118**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. AFT Solidarity 527**

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D581093**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. AFT Solidarity 527**

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D581062**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. AFT Solidarity 527**

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 24 / 2015

**Transaction ID : D580956**

Amount of Each Disbursement this Period

493.34

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Battleground Texas**

Mailing Address PO Box 11525

City Austin State TX Zip Code 78711

Purpose of Disbursement  
Non Federal Canvassing

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 14 / 2015

**Transaction ID : D584655**

Amount of Each Disbursement this Period

7000.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Tommie Pierson, Sr.**

Mailing Address 1269 Shepley Dr

City Saint Louis State MO Zip Code 63137-3506

Purpose of Disbursement  
Non-Federal Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2015

**Transaction ID : D578742**

Amount of Each Disbursement this Period

10000.00

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

17493.34

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2015

Transaction ID : D580475

Amount of Each Disbursement this Period

82.76

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : D580498

Amount of Each Disbursement this Period

1798.43

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : D580495

Amount of Each Disbursement this Period

82.76

\* In-Kind

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

1963.95

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

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 / 14 / 2015

Transaction ID : D580470

Amount of Each Disbursement this Period

1798.43

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

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 / 17 / 2015

Transaction ID : D580552

Amount of Each Disbursement this Period

1798.43

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

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 / 16 / 2015

Transaction ID : D580520

Amount of Each Disbursement this Period

1798.43

\* In-Kind

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

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

5395.29

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 16 / 2015

Transaction ID : D580512

Amount of Each Disbursement this Period

82.76

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 17 / 2015

Transaction ID : D580565

Amount of Each Disbursement this Period

82.76

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 09 / 2015

Transaction ID : D580052

Amount of Each Disbursement this Period

82.76

\* In-Kind

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

248.28

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 09 / 2015

Transaction ID : D580053

Amount of Each Disbursement this Period

899.21

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 24 / 2015

Transaction ID : D580957

Amount of Each Disbursement this Period

1881.19

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 23 / 2015

Transaction ID : D580908

Amount of Each Disbursement this Period

82.76

\* In-Kind

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

2863.16

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

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 / 23 / 2015

Transaction ID : D580909

Amount of Each Disbursement this Period

1798.43

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

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 / 22 / 2015

Transaction ID : D580881

Amount of Each Disbursement this Period

1798.43

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 22 / 2015

Transaction ID : D580882

Amount of Each Disbursement this Period

82.76

\* In-Kind

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

3679.62

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2015

Transaction ID : D580830

Amount of Each Disbursement this Period

1798.43

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2015

Transaction ID : D580831

Amount of Each Disbursement this Period

82.76

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2015

Transaction ID : D581094

Amount of Each Disbursement this Period

1798.43

\* In-Kind

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

3679.62

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

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 / 28 / 2015

Transaction ID : D581095

Amount of Each Disbursement this Period

82.76

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

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 / 25 / 2015

Transaction ID : D580974

Amount of Each Disbursement this Period

1881.19

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

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 / 29 / 2015

Transaction ID : D581119

Amount of Each Disbursement this Period

82.76

\* In-Kind

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

2046.71

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

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 / 29 / 2015

Transaction ID : D581120

Amount of Each Disbursement this Period

1798.43

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

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 / 03 / 2015

Transaction ID : D581401

Amount of Each Disbursement this Period

1798.43

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 03 / 2015

Transaction ID : D581402

Amount of Each Disbursement this Period

82.76

\* In-Kind

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

3679.62

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2015

Transaction ID : D581339

Amount of Each Disbursement this Period

82.76

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2015

Transaction ID : D581340

Amount of Each Disbursement this Period

1798.43

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2015

Transaction ID : D581267

Amount of Each Disbursement this Period

82.76

\* In-Kind

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

1963.95

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

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 / 2015

Transaction ID : D581196

Amount of Each Disbursement this Period

1798.43

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

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 / 30 / 2015

Transaction ID : D581149

Amount of Each Disbursement this Period

1798.43

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 30 / 2015

Transaction ID : D581150

Amount of Each Disbursement this Period

82.76

\* In-Kind

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

3679.62

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Printing

004

Candidate Name

Category/  
Type

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 / 13 / 2015

Transaction ID : D584656

Amount of Each Disbursement this Period

2500.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Postage

001

Candidate Name

Category/  
Type

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 / 13 / 2015

Transaction ID : D584657

Amount of Each Disbursement this Period

2100.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Housing for Canvassers

001

Candidate Name

Category/  
Type

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  
12 / 01 / 2015

Transaction ID : D584658

Amount of Each Disbursement this Period

3055.67

\* In-Kind

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

7655.67

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Printing

004

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : D584659

Amount of Each Disbursement this Period

16027.74

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Printing

004

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 13 / 2015

Transaction ID : D584660

Amount of Each Disbursement this Period

985.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Canvassing

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 23 / 2015

Transaction ID : D584661

Amount of Each Disbursement this Period

100000.00

\* In-Kind

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

117012.74

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Canvassing

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 02 / 2015

Transaction ID : D584662

Amount of Each Disbursement this Period

30000.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES**

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Printing

004

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : D584471

Amount of Each Disbursement this Period

15495.76

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Mailing Address 501 THIRD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Non Federal Pledge Cards

001

Candidate Name

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : D584663

Amount of Each Disbursement this Period

2150.00

\* In-Kind

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

47645.76

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal Inkind Staff

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D581154**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal Inkind Staff

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D581271**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D581344**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal Inkind Staff

001

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  
11 / 03 / 2015

**Transaction ID : D581407**

Amount of Each Disbursement this Period

467.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal Inkind Staff

001

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 / 29 / 2015

**Transaction ID : D581125**

Amount of Each Disbursement this Period

203.80

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal Inkind Staff

001

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 / 28 / 2015

**Transaction ID : D581099**

Amount of Each Disbursement this Period

101.90

\* In-Kind

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

772.70

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : D580977

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal Inkind Staff

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : D580643

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal Inkind Staff

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : D580835

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D580057**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D579912**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal Inkind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D579783**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal Inkind Staff

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2015			

**Transaction ID : D580285**

Amount of Each Disbursement this Period

120.00
--------

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2015			

**Transaction ID : D579780**

Amount of Each Disbursement this Period

203.80
--------

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2015			

**Transaction ID : D579739**

Amount of Each Disbursement this Period

275.40
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\* In-Kind

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

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

599.20
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement Non Federal Inkind Staff

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 03 / 2015

**Transaction ID : D579733**

Amount of Each Disbursement this Period: 71.60

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement Non Federal Inkind Staff

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 02 / 2015

**Transaction ID : D579714**

Amount of Each Disbursement this Period: 233.50

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement Non Federal In Kind Staff

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 02 / 2015

**Transaction ID : D579710**

Amount of Each Disbursement this Period: 101.90

\* In-Kind

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 407.00

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal Inkind Staff

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D580351

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D580352

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Firemen and Oilers Political League**

Mailing Address NCFO  
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement  
Non Federal Inkind Staff

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D580476

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D580494**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

173.08
--------

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D580511**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

173.08
--------

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D580350**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

173.08
--------

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

\* In-Kind

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

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

519.24
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Greater Louisville Central Labor Council**

Mailing Address 1244 South Fourth Street

City State Zip Code  
Louisville KY 40203

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
10 / 14 / 2015

Transaction ID : D580473

Amount of Each Disbursement this Period

173.08

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Greater Louisville Central Labor Council**

Mailing Address 1244 South Fourth Street

City State Zip Code  
Louisville KY 40203

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
10 / 17 / 2015

Transaction ID : D580564

Amount of Each Disbursement this Period

173.08

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Greater Louisville Central Labor Council**

Mailing Address 1244 South Fourth Street

City State Zip Code  
Louisville KY 40203

Purpose of Disbursement  
Non Federal In Kind Staff

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 Y Y  
09 / 30 / 2015

Transaction ID : D579660

Amount of Each Disbursement this Period

173.08

\* In-Kind

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

519.24

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Greater Louisville Central Labor Council**

Mailing Address 1244 South Fourth Street

City Louisville State KY Zip Code 40203

Purpose of Disbursement  
Non Federal Inkind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2015

Transaction ID : D579734

Amount of Each Disbursement this Period

86.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Greater Louisville Central Labor Council**

Mailing Address 1244 South Fourth Street

City Louisville State KY Zip Code 40203

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

Transaction ID : D579692

Amount of Each Disbursement this Period

173.08

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Greater Louisville Central Labor Council**

Mailing Address 1244 South Fourth Street

City Louisville State KY Zip Code 40203

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2015

Transaction ID : D579759

Amount of Each Disbursement this Period

173.08

\* In-Kind

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

432.70

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D579732**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

86.54
-------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D580284**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

173.08
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D580056**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

173.08
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

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

432.70
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Greater Louisville Central Labor Council**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2015			

Mailing Address 1244 South Fourth Street

**Transaction ID : D579782**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

173.08
--------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. Greater Louisville Central Labor Council**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			29			2015			

Mailing Address 1244 South Fourth Street

**Transaction ID : D579626**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

173.08
--------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. Greater Louisville Central Labor Council**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			28			2015			

Mailing Address 1244 South Fourth Street

**Transaction ID : D579592**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

173.08
--------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

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

519.24
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D579333**

City Louisville State KY Zip Code 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**B. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D579322**

City Louisville State KY Zip Code 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**C. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D579313**

City Louisville State KY Zip Code 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

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

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

519.24
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D579133**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**B. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D579141**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**C. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D579162**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

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

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

519.24
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D579252**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**B. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D579178**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**C. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D579276**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

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

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

519.24
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D580642**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

173.08

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**B. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D580592**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

173.08

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**C. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D580913**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

173.08

Candidate Name

\* In-Kind

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

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

519.24
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D580834**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**B. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D580885**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**C. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D580959**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

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

519.24
--------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D580976**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**B. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D581064**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**C. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D581098**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

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

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

519.24
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D581123**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

86.54
-------

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**B. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D581124**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

86.54
-------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**C. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D581406**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

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

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

346.16
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D581343**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**B. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D581153**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**C. Greater Louisville Central Labor Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2015

Mailing Address 1244 South Fourth Street

**Transaction ID : D581270**

City State Zip Code  
Louisville KY 40203

Amount of Each Disbursement this Period

173.08
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

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

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

519.24
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D581113</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D581144</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D581330</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	814.35
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 23 / 2015

Transaction ID : D582037

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 11 / 2015

Transaction ID : D582038

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 17 / 2015

Transaction ID : D582032

Amount of Each Disbursement this Period

271.45

\* In-Kind

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

814.35

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

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 Y Y  
11 / 16 / 2015

Transaction ID : D582052

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

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 Y Y  
11 / 14 / 2015

Transaction ID : D582034

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

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 Y Y  
11 / 21 / 2015

Transaction ID : D582049

Amount of Each Disbursement this Period

271.45

\* In-Kind

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

814.35

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D582050</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 11 / 24 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D582045</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 11 / 12 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D582046</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	814.35
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2015			

Transaction ID : D582041

Amount of Each Disbursement this Period

271.45
--------

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2015			

Transaction ID : D582042

Amount of Each Disbursement this Period

271.45
--------

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			05			2015			

Transaction ID : D583573

Amount of Each Disbursement this Period

271.45
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\* In-Kind

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

814.35
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

12 / 11 / 2015

Transaction ID : D583576

Amount of Each Disbursement this Period

135.73

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

12 / 09 / 2015

Transaction ID : D583577

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal Inkind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

12 / 08 / 2015

Transaction ID : D583578

Amount of Each Disbursement this Period

135.73

\* In-Kind

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

542.91

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 12 / 10 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D583570</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 12 / 08 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D583571</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 135.73
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 12 / 04 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D583566</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	678.63
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal Inkind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : D583567

Amount of Each Disbursement this Period

135.73

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal Inkind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 12 / 2015

Transaction ID : D583563

Amount of Each Disbursement this Period

135.73

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 07 / 2015

Transaction ID : D583564

Amount of Each Disbursement this Period

135.73

\* In-Kind

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

407.19

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 12 / 12 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D583560</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 135.73
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 12 / 07 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D583561</b>
City Houston	State TX	
Purpose of Disbursement Non Federal Inkind Staff	Candidate Name	Amount of Each Disbursement this Period 135.73
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 12 / 03 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D582329</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	542.91
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D582299</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D582300</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 12 / 01 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D582296</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	814.35
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 11 / 10 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D582056</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 11 / 13 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D582054</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 10 / 27 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D581058</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	814.35
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 28 / 2015

**Transaction ID : D581088**

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 25 / 2015

**Transaction ID : D580971**

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 23 / 2015

**Transaction ID : D580904**

Amount of Each Disbursement this Period

271.45

\* In-Kind

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

814.35

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 10 / 24 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D580952</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 10 / 22 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D580877</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 10 / 20 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D580645</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	814.35
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2015

Transaction ID : D580826

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 21 / 2015

Transaction ID : D579253

Amount of Each Disbursement this Period

135.73

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 19 / 2015

Transaction ID : D579174

Amount of Each Disbursement this Period

271.45

\* In-Kind

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

678.63

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D579317</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D579278</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 135.73
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 09 / 25 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D579336</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	678.63
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2015

Transaction ID : D579588

Amount of Each Disbursement this Period

135.73

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 09 / 2015

Transaction ID : D580049

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2015

Transaction ID : D579914

Amount of Each Disbursement this Period

271.45

\* In-Kind

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

678.63

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2015

Transaction ID : D579784

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2015

Transaction ID : D580280

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2015

Transaction ID : D579756

Amount of Each Disbursement this Period

271.45

\* In-Kind

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

814.35

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2015

Transaction ID : D579736

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

Transaction ID : D579661

Amount of Each Disbursement this Period

135.73

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

Transaction ID : D579694

Amount of Each Disbursement this Period

271.45

\* In-Kind

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

678.63

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2015

Transaction ID : D579713

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2015

Transaction ID : D580582

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2015

Transaction ID : D580514

Amount of Each Disbursement this Period

271.45

\* In-Kind

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

814.35

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D580550</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 10 / 13 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D580345</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Harris County AFL-CIO Council</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2015
Mailing Address 2505 Sutherland		<b>Transaction ID : D580497</b>
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 135.73
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:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	678.63
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

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 / 14 / 2015

Transaction ID : D580477

Amount of Each Disbursement this Period

135.73

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Harris County AFL-CIO Council**

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

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 / 03 / 2015

Transaction ID : D581392

Amount of Each Disbursement this Period

271.45

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. International Brotherhood of Electrical Workers Local 654 General Fund**

Mailing Address 3729 Chichester Ave.

City Boothwyn State PA Zip Code 19061

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

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 / 19 / 2015

Transaction ID : D580587

Amount of Each Disbursement this Period

670.08

\* In-Kind

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

1077.26

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. JCAESP/AFSCME Local 4011 General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2015

Mailing Address 4315 Preston Highway  
Suite 101

**Transaction ID : D581104**

City Louisville State KY Zip Code 40213

Amount of Each Disbursement this Period

295.36
--------

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

\* In-Kind

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. Lemmon Tree Consulting**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2015

Mailing Address 137 Edward Drive

**Transaction ID : D580288**

City Millersburg State PA Zip Code 17061

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Non Federal Media Consulting Services

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Lemmon Tree Consulting**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		23		2015

Mailing Address 137 Edward Drive

**Transaction ID : D584385**

City Millersburg State PA Zip Code 17061

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Non Federal Media Consulting Services

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

10295.36
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Lexicon**

Mailing Address 10300 Farnham Drive

City State Zip Code  
Bethesda MD 20814

Purpose of Disbursement  
Non Federal Printing

004

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  
12 / 21 / 2015

**Transaction ID : D584383**

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

**B. Lexicon**

Mailing Address 10300 Farnham Drive

City State Zip Code  
Bethesda MD 20814

Purpose of Disbursement  
Non Federal Printing

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : D579116**

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Lexicon**

Mailing Address 10300 Farnham Drive

City State Zip Code  
Bethesda MD 20814

Purpose of Disbursement  
Non Federal Flier Design

004

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  
07 / 23 / 2015

**Transaction ID : D576038**

Amount of Each Disbursement this Period

100.00

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

950.00

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Mosaic**

Mailing Address 4801 Viewpoint Place

City State Zip Code  
Cheverly MD 20781

Purpose of Disbursement  
Non Federal Fliers

004

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
0	7			2	3			2	0	1	5		

**Transaction ID : D576037**

Amount of Each Disbursement this Period

2	1	8	3	.	3	9
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City State Zip Code  
Scranton PA 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

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
1	0			1	3			2	0	1	5		

**Transaction ID : D580354**

Amount of Each Disbursement this Period

2	5	7	.	9	4
---	---	---	---	---	---

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City State Zip Code  
Scranton PA 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

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
1	0			1	4			2	0	1	5		

**Transaction ID : D580472**

Amount of Each Disbursement this Period

2	5	7	.	9	4
---	---	---	---	---	---

\* In-Kind

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

2	6	9	.	9	7
---	---	---	---	---	---

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

2	6	9	.	9	7
---	---	---	---	---	---

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : D580493

Amount of Each Disbursement this Period

257.94

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2015

Transaction ID : D580510

Amount of Each Disbursement this Period

257.94

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2015

Transaction ID : D580563

Amount of Each Disbursement this Period

128.97

\* In-Kind

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

644.85

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2015

Transaction ID : D580591

Amount of Each Disbursement this Period

257.94

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2015

Transaction ID : D580287

Amount of Each Disbursement this Period

257.94

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 09 / 2015

Transaction ID : D580059

Amount of Each Disbursement this Period

257.94

\* In-Kind

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

773.82

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 29 / 2015

Transaction ID : D581127

Amount of Each Disbursement this Period

257.94

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 28 / 2015

Transaction ID : D581101

Amount of Each Disbursement this Period

257.94

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 25 / 2015

Transaction ID : D580979

Amount of Each Disbursement this Period

257.94

\* In-Kind

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

773.82

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 27 / 2015

Transaction ID : D581066

Amount of Each Disbursement this Period

257.94

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 21 / 2015

Transaction ID : D580837

Amount of Each Disbursement this Period

257.94

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 20 / 2015

Transaction ID : D580641

Amount of Each Disbursement this Period

257.94

\* In-Kind

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

773.82

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 22 / 2015

Transaction ID : D580887

Amount of Each Disbursement this Period

257.94

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 23 / 2015

Transaction ID : D580915

Amount of Each Disbursement this Period

257.94

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2015

Transaction ID : D580961

Amount of Each Disbursement this Period

128.97

\* In-Kind

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

644.85

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City State Zip Code  
Scranton PA 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2015

**Transaction ID : D581409**

Amount of Each Disbursement this Period

257.94

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City State Zip Code  
Scranton PA 18512

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2015

**Transaction ID : D581346**

Amount of Each Disbursement this Period

42.96

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City State Zip Code  
Scranton PA 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2015

**Transaction ID : D581347**

Amount of Each Disbursement this Period

64.48

\* In-Kind

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

365.38

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City State Zip Code  
Scranton PA 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2015			

**Transaction ID : D581273**

Amount of Each Disbursement this Period

257.94
--------

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City State Zip Code  
Scranton PA 18512

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001

Candidate Name

Category/  
Type

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			30			2015			

**Transaction ID : D581156**

Amount of Each Disbursement this Period

128.97
--------

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Northeast Pennsylvania Area Labor Federation General Fund**

Mailing Address 1258 O'Neill Hwy

City State Zip Code  
Scranton PA 18512

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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			30			2015			

**Transaction ID : D581157**

Amount of Each Disbursement this Period

128.97
--------

\* In-Kind

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

515.88
--------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Northwestern PA Area Labor Federation**

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : D581159

Amount of Each Disbursement this Period

461.12

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Northwestern PA Area Labor Federation**

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2015

Transaction ID : D581198

Amount of Each Disbursement this Period

109.55

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Northwestern PA Area Labor Federation**

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2015

Transaction ID : D581275

Amount of Each Disbursement this Period

242.00

\* In-Kind

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

812.67

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Northwestern PA Area Labor Federation**

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001

Candidate Name

Category/  
Type

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  
11 / 03 / 2015

Transaction ID : D581411

Amount of Each Disbursement this Period

109.55

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Northwestern PA Area Labor Federation**

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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  
11 / 03 / 2015

Transaction ID : D581412

Amount of Each Disbursement this Period

109.56

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Northwestern PA Area Labor Federation**

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 23 / 2015

Transaction ID : D580917

Amount of Each Disbursement this Period

461.12

\* In-Kind

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

680.23

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Northwestern PA Area Labor Federation**

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 22 / 2015

Transaction ID : D580889

Amount of Each Disbursement this Period

461.12

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Northwestern PA Area Labor Federation**

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 24 / 2015

Transaction ID : D580963

Amount of Each Disbursement this Period

230.56

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Northwestern PA Area Labor Federation**

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 24 / 2015

Transaction ID : D580964

Amount of Each Disbursement this Period

230.55

\* In-Kind

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

922.23

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Northwestern PA Area Labor Federation**

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D581103**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Northwestern PA Area Labor Federation**

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D581068**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Northwestern PA Area Labor Federation**

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D581129**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Colleen M. O'Neill-Yanchulis**

Mailing Address 283 College Manor Drive

City State Zip Code  
Arnold MD 21012

Purpose of Disbursement  
Media Production - Non Federal Fliers

004

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2015

Transaction ID : D584369

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City State Zip Code  
Columbus OH 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2015

Transaction ID : D581326

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City State Zip Code  
Columbus OH 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 03 / 2015

Transaction ID : D581388

Amount of Each Disbursement this Period

111.54

\* In-Kind

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

323.08

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D581244**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D581141**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D581111**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 28 / 2015

**Transaction ID : D581084**

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 25 / 2015

**Transaction ID : D580969**

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 27 / 2015

**Transaction ID : D581044**

Amount of Each Disbursement this Period

111.54

\* In-Kind

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

334.62

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D580900**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D580945**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D580817**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D580639**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D580874**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D580274**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D579913**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D580045**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D580333**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D579711**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D579691**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D579731**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2015

**Transaction ID : D579758**

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2015

**Transaction ID : D579781**

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2015

**Transaction ID : D580590**

Amount of Each Disbursement this Period

111.54

\* In-Kind

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

334.62

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2015

Transaction ID : D580562

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2015

Transaction ID : D580509

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : D580492

Amount of Each Disbursement this Period

111.54

\* In-Kind

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

334.62

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2015

Transaction ID : D580471

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2015

Transaction ID : D578861

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2015

Transaction ID : D578884

Amount of Each Disbursement this Period

111.54

\* In-Kind

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

334.62

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D578885**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D578965**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D578924**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D578925**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D578926**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D578979**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

### A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2015

Transaction ID : D579016

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

### B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2015

Transaction ID : D579046

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

### C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

Transaction ID : D579114

Amount of Each Disbursement this Period

111.54

\* In-Kind

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

334.62

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2015

Transaction ID : D579132

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2015

Transaction ID : D579140

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 19 / 2015

Transaction ID : D579173

Amount of Each Disbursement this Period

111.54

\* In-Kind

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

334.62

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

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
0	9		1	8		2	0	1	5

Transaction ID : D579152

Amount of Each Disbursement this Period

1	1	.	5	4
---	---	---	---	---

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

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
0	9		2	2		2	0	1	5

Transaction ID : D579275

Amount of Each Disbursement this Period

1	1	.	5	4
---	---	---	---	---

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

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
0	9		2	1		2	0	1	5

Transaction ID : D579251

Amount of Each Disbursement this Period

1	1	.	5	4
---	---	---	---	---

\* In-Kind

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

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

3	3	4	.	6	2
---	---	---	---	---	---

1	1	.	5	4
---	---	---	---	---



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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2015

**Transaction ID : D579332**

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2015

**Transaction ID : D579625**

Amount of Each Disbursement this Period

111.54

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2015

**Transaction ID : D579591**

Amount of Each Disbursement this Period

111.54

\* In-Kind

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

334.62

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D579659**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D579312**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO General Fund**

Mailing Address c/o Secretary Petee Talley  
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Non Federal In Kind Staff

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D579321**

Amount of Each Disbursement this Period

\* In-Kind

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

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial) <b>A. Philadelphia AFL-CIO Council General Fund</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2015
Mailing Address c/o Pat Eiding 22 S 22nd Street		<b>Transaction ID : D580466</b>
City Philadelphia	State PA Zip Code 19103	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 328.87
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:	Category/Type 001	* In-Kind

Full Name (Last, First, Middle Initial) <b>B. Philadelphia AFL-CIO Council General Fund</b>		Date of Disbursement MM / DD / YYYY 10 / 13 / 2015
Mailing Address c/o Pat Eiding 22 S 22nd Street		<b>Transaction ID : D580353</b>
City Philadelphia	State PA Zip Code 19103	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 328.87
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:	Category/Type 001	* In-Kind

Full Name (Last, First, Middle Initial) <b>C. Philadelphia AFL-CIO Council General Fund</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2015
Mailing Address c/o Pat Eiding 22 S 22nd Street		<b>Transaction ID : D580500</b>
City Philadelphia	State PA Zip Code 19103	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 328.87
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:	Category/Type 001	* In-Kind

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	986.61
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		19		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

**Transaction ID : D580586**

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**B. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

**Transaction ID : D580517**

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**C. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

**Transaction ID : D580556**

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

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

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

986.61
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

**Transaction ID : D580286**

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**B. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

**Transaction ID : D580058**

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**C. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

**Transaction ID : D580836**

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

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

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

986.61
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement  
Non Federal In Kind Staff

001

Transaction ID : D580649

Amount of Each Disbursement this Period

328.87
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement  
Non Federal In Kind Staff

001

Transaction ID : D580960

Amount of Each Disbursement this Period

328.87
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement  
Non Federal In Kind Staff

001

Transaction ID : D580886

Amount of Each Disbursement this Period

328.87
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

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

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

986.61
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement  
Non Federal In Kind Staff

001

Transaction ID : D580914

Amount of Each Disbursement this Period

328.87
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement  
Non Federal In Kind Staff

001

Transaction ID : D580978

Amount of Each Disbursement this Period

328.87
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement  
Non Federal In Kind Staff

001

Transaction ID : D581065

Amount of Each Disbursement this Period

328.87
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

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

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

986.61
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement  
Non Federal In Kind Staff

001

Transaction ID : D581100

Amount of Each Disbursement this Period

328.87
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement  
Non Federal In Kind Staff

001

Transaction ID : D581126

Amount of Each Disbursement this Period

328.87
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement  
Non Federal In Kind Staff

001

Transaction ID : D581155

Amount of Each Disbursement this Period

328.87
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

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

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

986.61
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

**Transaction ID : D581345**

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**B. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

**Transaction ID : D581272**

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**C. Philadelphia AFL-CIO Council General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2015

Mailing Address c/o Pat Eiding  
22 S 22nd Street

**Transaction ID : D581408**

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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

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

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

986.61
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Texas Votes**

Mailing Address 201 E Ben White Blvd Bldg B, Suite

City Austin State TX Zip Code 78704

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

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  
12 / 12 / 2015

Transaction ID : D584664

Amount of Each Disbursement this Period

1030.44

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. SEIU PA State Council General Fund**

Mailing Address 1500 N. Second Street  
Suite 11

City Harrisburg State PA Zip Code 17102

Purpose of Disbursement  
In Kind Non Federal Staff

Category/  
Type

Candidate Name

**SEIU PA State Council**

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  
11 / 03 / 2015

Transaction ID : D582271

Amount of Each Disbursement this Period

1509.31

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Southeastern Pennsylvania Area Labor Federation General Fund**

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

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  
11 / 03 / 2015

Transaction ID : D581410

Amount of Each Disbursement this Period

287.43

\* In-Kind

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

2827.18

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Southeastern Pennsylvania Area Labor Federation General Fund**

Date of Disbursement

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

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

**Transaction ID : D581274**

Amount of Each Disbursement this Period

2	8	7	.	4	3
---	---	---	---	---	---

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. Southeastern Pennsylvania Area Labor Federation General Fund**

Date of Disbursement

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

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

**Transaction ID : D581348**

Amount of Each Disbursement this Period

2	8	7	.	4	3
---	---	---	---	---	---

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. Southeastern Pennsylvania Area Labor Federation General Fund**

Date of Disbursement

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

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

**Transaction ID : D581158**

Amount of Each Disbursement this Period

2	8	7	.	4	3
---	---	---	---	---	---

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

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

8	6	2	.	2	9
---	---	---	---	---	---

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

8	6	2	.	2	9
---	---	---	---	---	---

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Southeastern Pennsylvania Area Labor Federation General Fund**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2015			

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

**Transaction ID : D581128**

Amount of Each Disbursement this Period

287.43
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. Southeastern Pennsylvania Area Labor Federation General Fund**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2015			

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

**Transaction ID : D581102**

Amount of Each Disbursement this Period

287.43
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. Southeastern Pennsylvania Area Labor Federation General Fund**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2015			

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

**Transaction ID : D581067**

Amount of Each Disbursement this Period

287.43
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

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

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

862.29
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Southeastern Pennsylvania Area Labor Federation General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2015

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

**Transaction ID : D580888**

Amount of Each Disbursement this Period

287.43

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. Southeastern Pennsylvania Area Labor Federation General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2015

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

**Transaction ID : D580962**

Amount of Each Disbursement this Period

287.43

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. Southeastern Pennsylvania Area Labor Federation General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2015

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

**Transaction ID : D580916**

Amount of Each Disbursement this Period

287.43

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

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

862.29

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Southeastern Pennsylvania Area Labor Federation General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2015

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

**Transaction ID : D580646**

Amount of Each Disbursement this Period

287.43

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. Southeastern Pennsylvania Area Labor Federation General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2015

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

**Transaction ID : D580838**

Amount of Each Disbursement this Period

287.43

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. Southeastern Pennsylvania Area Labor Federation General Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2015

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

**Transaction ID : D580553**

Amount of Each Disbursement this Period

287.43

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

\* In-Kind

State: District:

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

862.29

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. Southeastern Pennsylvania Area Labor Federation General Fund**

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2015

Transaction ID : D580515

Amount of Each Disbursement this Period

287.43

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Southeastern Pennsylvania Area Labor Federation General Fund**

Mailing Address 1000 Germantown Pike Road  
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2015

Transaction ID : D580583

Amount of Each Disbursement this Period

287.43

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. The Pivot Group**

Mailing Address 1720 I St NW  
Ste 550

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Non Federal Fliers

004

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2015

Transaction ID : D581117

Amount of Each Disbursement this Period

5150.00

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

5724.86

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D581121**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

847.03
--------

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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:		

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D581122**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

169.23
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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:		

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D581063**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

169.23
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

\* In-Kind

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:		

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

1185.49
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

**Transaction ID : D581096**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

667.87
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

**Transaction ID : D581097**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

**Transaction ID : D580975**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

1006.33
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D580883**

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

3	5	3	.	7	4
---	---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D580884**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D580832**

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

3	0	6	.	4	8
---	---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

8	2	9	.	4	5
---	---	---	---	---	---

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

8	2	9	.	4	5
---	---	---	---	---	---

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

**Transaction ID : D580833**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

**Transaction ID : D580650**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

**Transaction ID : D580958**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

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

507.69
--------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Purpose of Disbursement  
Non Federal In Kind Staff

001

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  
10 / 23 / 2015

Transaction ID : D580910

Amount of Each Disbursement this Period

660.22

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Purpose of Disbursement  
Non Federal In Kind Staff

001

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  
10 / 23 / 2015

Transaction ID : D580911

Amount of Each Disbursement this Period

169.23

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Purpose of Disbursement  
Non Federal Inkind Staff

001

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  
10 / 30 / 2015

Transaction ID : D581151

Amount of Each Disbursement this Period

532.90

\* In-Kind

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

1362.35

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 30 / 2015

Transaction ID : D581152

Amount of Each Disbursement this Period

169.23

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

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 / 2015

Transaction ID : D581197

Amount of Each Disbursement this Period

1165.95

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

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 / 01 / 2015

Transaction ID : D581268

Amount of Each Disbursement this Period

169.23

\* In-Kind

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

1504.41

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2015			

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D581269**

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

188.89
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2015			

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D581403**

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

847.03
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2015			

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D581404**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

169.23
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

1205.15
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D581341**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D581342**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

847.03
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D580588**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

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

1185.49
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

**Transaction ID : D580547**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

33.02
-------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

**Transaction ID : D580548**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

147.90
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

**Transaction ID : D580557**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

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

350.15
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D580518**

Purpose of Disbursement  
Non Federal In Kind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1	6	9	.	2	3
---	---	---	---	---	---

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D580501**

Purpose of Disbursement  
Non Federal In Kind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1	6	9	.	2	3
---	---	---	---	---	---

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D580467**

Purpose of Disbursement  
Non Federal In Kind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1	6	9	.	2	3
---	---	---	---	---	---

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

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

5	0	7	.	6	9
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**TOTAL** This Period (last page this line number only)..... ▶

5	0	7	.	6	9
---	---	---	---	---	---

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		14		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D580468**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal Inkind Staff

Category/  
Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D580054**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

\* In-Kind

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

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D580055**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

Category/  
Type

Candidate Name

\* In-Kind

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

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

<input type="text" value="603.03"/>
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**TOTAL** This Period (last page this line number only)..... ▶

<input type="text" value=""/>
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D579910**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D580283**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

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

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D580348**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

5	0	7	.	6	9
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**TOTAL** This Period (last page this line number only)..... ▶

5	0	7	.	6	9
---	---	---	---	---	---

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

Mailing Address 1775 K Street, NW

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

City Washington State DC Zip Code 20006-1598

**Transaction ID : D580349**

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

Candidate Name

682.84
--------

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

Mailing Address 1775 K Street, NW

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

City Washington State DC Zip Code 20006-1598

**Transaction ID : D579777**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

Candidate Name

169.23
--------

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

Mailing Address 1775 K Street, NW

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

City Washington State DC Zip Code 20006-1598

**Transaction ID : D579757**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

Candidate Name

169.23
--------

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

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

1021.30
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579737**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579662**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		01		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579689**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

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

507.69
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579715**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579330**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579318**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

353.74
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

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

692.20
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579319**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579314**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

306.48
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579310**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

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

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

644.94
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	22	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579279**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

567.96
--------

Purpose of Disbursement  
Non Federal Inkind Staff

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	22	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579280**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

169.23
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	29	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579627**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

169.23
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

\* In-Kind

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

906.42
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2015

**Transaction ID : D579334**

Amount of Each Disbursement this Period

353.74

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2015

**Transaction ID : D579589**

Amount of Each Disbursement this Period

169.23

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 21 / 2015

**Transaction ID : D579248**

Amount of Each Disbursement this Period

169.23

\* In-Kind

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

692.20

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D579176**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D579177**

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

9	2	1	.	7	0
---	---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D579143**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	7	6	.	8	8
---	---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

1	2	6	.	7	8	1
---	---	---	---	---	---	---

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

1	2	6	.	7	8	1
---	---	---	---	---	---	---

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579144**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

176.88

Candidate Name

\* In-Kind

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:		

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579160**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

169.23

Candidate Name

\* In-Kind

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:		

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579161**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

176.88

Candidate Name

\* In-Kind

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:		

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

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

522.99
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D579138**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
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Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D579115**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

7	0	.	0	1
---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D579129**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

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

4	0	8	.	4	7
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D579130**

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

3	0	6	.	4	8
---	---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D579110**

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

7	0	.	0	1
---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D579112**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

5	4	5	.	7	2
---	---	---	---	---	---

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

5	4	5	.	7	2
---	---	---	---	---	---

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	14	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579043**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

280.77

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	13	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D579017**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

280.77

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	11	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D578969**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

280.77

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

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

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

842.31

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D578970**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

6	1	.	7	1
---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D578971**

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

3	0	.	8	5
---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D578976**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

2	8	.	0	7	7
---	---	---	---	---	---

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

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

3	7	.	3	3
---	---	---	---	---

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

3	7	.	3	3
---	---	---	---	---

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Purpose of Disbursement  
Non Federal Inkind Staff

001

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2015

**Transaction ID : D578977**

Amount of Each Disbursement this Period

141.37

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2015

**Transaction ID : D578934**

Amount of Each Disbursement this Period

280.77

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Purpose of Disbursement  
Non Federal In Kind Staff

001

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2015

**Transaction ID : D578935**

Amount of Each Disbursement this Period

280.77

\* In-Kind

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

702.91

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D578936**

Purpose of Disbursement  
Non Federal In Kind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

2	8	0	7	7
---	---	---	---	---

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D578937**

Purpose of Disbursement  
Non Federal Inkind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

8	9	.	2	7
---	---	---	---	---

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

**Transaction ID : D578938**

Purpose of Disbursement  
Non Federal Inkind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

4	3	.	1	3
---	---	---	---	---

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

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

4	1	3	.	1	7
---	---	---	---	---	---

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

4	1	3	.	1	7
---	---	---	---	---	---

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D578939**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

178.53
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	09	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D578940**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

178.53
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	08	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D578858**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

280.77
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

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

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

637.83
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	09	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D578892**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

280.77

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	08	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D578893**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

280.77

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	09	/	2015

Mailing Address 1775 K Street, NW

**Transaction ID : D578894**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

89.27

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

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

650.81
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. UFCW Int'l Union Working Families Advocacy Project**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2015

Mailing Address 1775 K Street, NW

**Transaction ID : D578895**

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

178.53
--------

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		05		2015

Mailing Address 80 F STREET NW

**Transaction ID : D579778**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

678.15
--------

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		13		2015

Mailing Address 80 F STREET NW

**Transaction ID : D580344**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

583.95
--------

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

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

1440.63
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	1	5

Mailing Address 80 F STREET NW

**Transaction ID : D580048**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

1	8	8	0	0	4	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

\* In-Kind

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D580279**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

9	1	0	3	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

\* In-Kind

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D580474**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

3	2	6	3	5	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

\* In-Kind

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

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

1	4	2	5	0	5	0	0	0	0
---	---	---	---	---	---	---	---	---	---

1	4	2	5	0	5	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D580465**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

179.53
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D580499**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

179.53
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D580554**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

179.54
--------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

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

538.60
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

M M M	/	D D D	/	Y Y Y Y Y
10		16		2015

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D580516**

Purpose of Disbursement  
Non Federal In Kind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

179.53
--------

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

M M M	/	D D D	/	Y Y Y Y Y
10		19		2015

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D580585**

Purpose of Disbursement  
Non Federal In Kind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

269.30
--------

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

M M M	/	D D D	/	Y Y Y Y Y
10		17		2015

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D580560**

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

179.52
--------

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

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

628.35
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D581328**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

326.35
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D581329**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

179.54
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D581389**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

269.30
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

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

775.19
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D581391**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

3	2	6	.	3	5
---	---	---	---	---	---

Purpose of Disbursement  
Non Federal Inkind Staff

0	0	1
Category/ Type		

\* In-Kind

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D581245**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

1	7	9	.	5	3
---	---	---	---	---	---

\* In-Kind

Purpose of Disbursement  
Non Federal In Kind Staff

0	0	1
Category/ Type		

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D581192**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

8	9	.	7	6
---	---	---	---	---

\* In-Kind

Purpose of Disbursement  
Non Federal Inkind Staff-PA

0	0	1
Category/ Type		

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

5	9	5	.	6	4
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**TOTAL** This Period (last page this line number only)..... ▶

5	9	5	.	6	4
---	---	---	---	---	---

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

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

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D580901**

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

8	9	.	7	6					
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Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

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

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D580902**

Purpose of Disbursement  
Non Federal Inkind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1	6	.	3	1					
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Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

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

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D580903**

Purpose of Disbursement  
Non Federal In Kind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

2	6	.	9	3					
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Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

5	2	.	2	3					
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**TOTAL** This Period (last page this line number only)..... ▶

5	2	.	2	3					
---	---	---	---	---	--	--	--	--	--

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D580950**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001
Category/ Type

89.76
-------

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D580951**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

89.77
-------

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D580823**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal Inkind Staff

001
Category/ Type

326.35
--------

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

\* In-Kind

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

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

505.88
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2015			

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D580824**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

89.77
-------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2015			

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D580825**

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001
Category/ Type

Amount of Each Disbursement this Period

239.37
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2015			

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D580648**

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

269.30
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

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

598.44
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

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

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D580640**

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

8	9	.	7	6							
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Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	9		2	0	1	5		

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D580593**

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

8	9	.	7	6							
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Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

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

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D580875**

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1	7	.	9	5	2						
---	---	---	---	---	---	--	--	--	--	--	--

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

3	5	.	9	0	4						
---	---	---	---	---	---	--	--	--	--	--	--

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

3	5	.	9	0	4						
---	---	---	---	---	---	--	--	--	--	--	--

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D580876**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

179.54
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D580970**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

326.35
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D581056**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Non Federal In Kind Staff

001
Category/ Type

89.77
-------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

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

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

595.66
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

M M M	/	D D D	/	Y Y Y Y Y
10		27		2015

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D581057**

Purpose of Disbursement  
Non Federal Inkind Staff-PA

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

89.76
-------

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

M M M	/	D D D	/	Y Y Y Y Y
10		29		2015

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D581112**

Purpose of Disbursement  
Non Federal In Kind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

359.06
--------

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

Mailing Address 80 F STREET NW

M M M	/	D D D	/	Y Y Y Y Y
10		30		2015

City WASHINGTON State DC Zip Code 20001

**Transaction ID : D581142**

Purpose of Disbursement  
Non Federal Inkind Staff

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

326.35
--------

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

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

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

775.17
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Workers' Voice**

Full Name (Last, First, Middle Initial)

**A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D581143**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

3	5	9	.	0	6
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Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D581086**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

8	9	.	7	6
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Purpose of Disbursement  
Non Federal Inkind Staff-PA

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

**C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES**

Date of Disbursement

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

Mailing Address 80 F STREET NW

**Transaction ID : D581087**

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

8	9	.	7	7
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Purpose of Disbursement  
Non Federal In Kind Staff

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

\* In-Kind

State: District:

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

5	3	8	.	5	9
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**TOTAL** This Period (last page this line number only)..... ▶

2	6	7	3	4	3	3	.	0	1
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 233 OF 233
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Workers' Voice**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AFL-CIO</b>	Nature of Debt (Purpose): Reimbursement for Internet Costs
Mailing Address 815 - 16th Street, NW	
City State Zip Code Washington DC 20006	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D569795</b>	
Amount Incurred This Period 217.86	Payment This Period 0.00	Outstanding Balance at Close of This Period 217.86

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AFL-CIO</b>	Nature of Debt (Purpose): Non Federal Walk Packets
Mailing Address 815 - 16th Street, NW	
City State Zip Code Washington DC 20006	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D580513</b>	
Amount Incurred This Period 169.65	Payment This Period 0.00	Outstanding Balance at Close of This Period 169.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mosaic</b>	Nature of Debt (Purpose): Non Federal Fliers
Mailing Address 4801 Viewpoint Place	
City State Zip Code Cheverly MD 20781	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D578857</b>	
Amount Incurred This Period 49668.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 49668.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	50055.51
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	50055.51
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) ▶	50055.51