

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

PAGE 1 OF 78
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER C C00484287
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Mosaic		Date 10 / 12 / 2012
Mailing Address 4801 Viewpoint Place		Amount 2790.00
City Cheverly	State MD	Zip Code 20781
Purpose of Expenditure Fliers	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 908266.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D463927

Full Name (Last, First, Middle Initial) of Payee Mosaic		Date 10 / 12 / 2012
Mailing Address 4801 Viewpoint Place		Amount 585.00
City Cheverly	State MD	Zip Code 20781
Purpose of Expenditure Fliers	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 53970.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D463928

(a) SUBTOTAL of Itemized Independent Expenditures.....	3375.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
Signature

[Electronically Filed] Date 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Mosaic	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 1755.00 </div>
City State Zip Code Cheverly MD 20781	Transaction ID : D463929
Purpose of Expenditure Fliers	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:
Category/Type 004	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Shelley Berkley	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 16399.56 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Mosaic	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 4801 Viewpoint Place	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 450.00 </div>
City State Zip Code Cheverly MD 20781	Transaction ID : D463931
Purpose of Expenditure Fliers	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00
Category/Type 004	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 81177.57 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 2205.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

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Ms. Elizabeth H Shuler
 Signature

[Electronically Filed] Date
M M / D D / Y Y Y Y
 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Mosaic		Date <div style="display: inline-block; margin-right: 10px;"><div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div></div>
Mailing Address 4801 Viewpoint Place		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2790.00</div>
City Cheverly	State MD	Zip Code 20781
Purpose of Expenditure Fliers	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: <u>00</u>
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D463932

Full Name (Last, First, Middle Initial) of Payee Mosaic		Date <div style="display: inline-block; margin-right: 10px;"><div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div></div>
Mailing Address 4801 Viewpoint Place		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1200.00</div>
City Cheverly	State MD	Zip Code 20781
Purpose of Expenditure Fliers	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <u>PA</u> District: <u>00</u>
Name of Federal Candidate Supported or Opposed by Expenditure: Bob Casey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">81177.57</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D463934

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">3990.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

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Ms. Elizabeth H Shuler

Signature _____ [Electronically Filed] Date

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2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Mosaic		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 4801 Viewpoint Place		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">630.00</div>
City State Zip Code Cheverly MD 20781	Transaction ID : D463936	
Purpose of Expenditure Fliers	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">295811.03</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 555 New Jersey Ave. N.W.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">219.19</div>
City State Zip Code Washington DC 20001	Transaction ID : D463938	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">295811.03</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">849.19</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER C C00484287
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee
AFT Solidarity 527

Date
M M / D D / Y Y Y Y Y Y
10 / 12 / 2012

Mailing Address 555 New Jersey Ave. N.W.

Amount
219.19

City Washington State DC Zip Code 20001

Transaction ID : D463939

Purpose of Expenditure In Kind Staff Category/Type 001

Office Sought: House State: OH
 Senate District: 06
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
Charlie Wilson

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 100465.44

Disbursement For: Primary General 2012
 Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)

Date
M M / D D / Y Y Y Y Y Y
10 / 12 / 2012

Mailing Address 1325 Massachusetts Ave. NW

Amount
235.40

City Washington State DC Zip Code 20005

Transaction ID : D463940

Purpose of Expenditure In Kind Staff Category/Type 001

Office Sought: House State:
 Senate District: 00
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
Willard Mitt Romney

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 908266.65

Disbursement For: Primary General 2012
 Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	454.59
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Ms. Elizabeth H Shuler

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
10 / 14 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 1325 Massachusetts Ave. NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 235.40 </div>
City Washington State DC Zip Code 20005	Transaction ID : D463941	
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 908266.65 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 259.04 </div>
City Washington State DC Zip Code 20001		Transaction ID : D463942
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KEITH ROTHFUS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 93173.00 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 494.44 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 494.44 </div>

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Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y
 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">259.04</div>
City Washington State DC Zip Code 20001	Transaction ID : D463943	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">81177.57</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">259.04</div>
City Washington State DC Zip Code 20001		Transaction ID : D463944
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bob Casey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">81177.57</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">518.08</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

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Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER C C00484287
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date 10 / 12 / 2012
Mailing Address 100 Indiana Avenue, N.W.		Amount 259.04
City Washington State DC Zip Code 20001	Transaction ID : D463945	
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 93173.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date 10 / 12 / 2012
Mailing Address 100 Indiana Avenue, N.W.		Amount 286.70
City Washington State DC Zip Code 20001	Transaction ID : D463946	
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 295811.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	545.74
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Ms. Elizabeth H Shuler

Signature

[Electronically Filed]

Date

10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">286.70</div>
City Washington State DC Zip Code 20001	Transaction ID : D463947	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">100465.44</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">286.70</div>
City Washington State DC Zip Code 20001	Transaction ID : D463948	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">295811.03</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">573.40</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">286.70</div>
City Washington State DC Zip Code 20001	Transaction ID : D463949	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Charlie Wilson		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">100465.44</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">287.71</div>
City Washington State DC Zip Code 20001	Transaction ID : D463950	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN OCEGUERA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">22460.63</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">574.41</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">287.71</div>
City Washington State DC Zip Code 20001	Transaction ID : D463951	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">53970.73</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">287.71</div>
City Washington State DC Zip Code 20001	Transaction ID : D463952	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Shelley Berkley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">16399.56</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">575.42</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 287.71 </div>
City Washington State DC Zip Code 20001	Transaction ID : D463953	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE HECK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">22460.63</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>	
Mailing Address 1300 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 291.19 </div>	
City Washington State DC Zip Code 20005		Transaction ID : D463954	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN OCEGUERA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">22460.63</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 578.90 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y
 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 1300 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 291.19 </div>
City Washington State DC Zip Code 20005	Transaction ID : D463955	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 53970.73 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 1300 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 291.19 </div>
City Washington State DC Zip Code 20005		Transaction ID : D463956
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Shelley Berkley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 16399.56 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 582.38 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER C C00484287
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date 10 / 12 / 2012
Mailing Address 1300 L Street, NW		Amount 291.19
City Washington State DC Zip Code 20005	Transaction ID : D463957	
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE HECK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 22460.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date 10 / 12 / 2012
Mailing Address 11720 Beltsville Drive #700		Amount 321.82
City Beltsville State MD Zip Code 20705	Transaction ID : D463958	
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171087.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	613.01
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
Signature [Electronically Filed] Date 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>
City State Zip Code Beltsville MD 20705	Transaction ID : D463959	
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>
City State Zip Code Beltsville MD 20705	Transaction ID : D463960	
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN OCEGUERA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">344.64</div>
City State Zip Code Beltsville MD 20705	Transaction ID : D463961	
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">53970.73</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">344.64</div>
City State Zip Code Beltsville MD 20705		Transaction ID : D463962
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Shelley Berkley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">16399.56</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">689.28</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">344.64</div>
City State Zip Code Beltsville MD 20705	Transaction ID : D463963	
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE HECK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">22460.63</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1300 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">349.58</div>	
City State Zip Code Washington DC 20005		Transaction ID : D463964	
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">215103.61</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">694.22</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 1300 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 349.58 </div>
City Washington State DC Zip Code 20005	Transaction ID : D463965	
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 215103.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 1300 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 426.53 </div>
City Washington State DC Zip Code 20005		Transaction ID : D463966
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 295811.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 776.11 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 776.11 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date
M M / D D / Y Y Y Y
 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 1300 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">426.53</div>
City Washington State DC Zip Code 20005	Transaction ID : D463967	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">100465.44</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 1300 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">426.53</div>
City Washington State DC Zip Code 20005	Transaction ID : D463968	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">295811.03</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">853.06</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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Y Y Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 1300 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">426.53</div>
City Washington State DC Zip Code 20005	Transaction ID : D463969	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Charlie Wilson		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">100465.44</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 555 New Jersey Ave. N.W.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">490.00</div>
City Washington State DC Zip Code 20001		Transaction ID : D463970
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">916.53</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

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

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 555 New Jersey Ave. N.W.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">490.00</div>
City Washington State DC Zip Code 20001	Transaction ID : D463971	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">604.09</div>
City Washington State DC Zip Code 20001		Transaction ID : D463972
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">215103.61</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1094.09</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">604.09</div>
City Washington State DC Zip Code 20001	Transaction ID : D463973	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">215103.61</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">674.39</div>
City Washington State DC Zip Code 20001		Transaction ID : D463974
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">171087.50</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1278.48</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION

Date
MM / DD / YYYY
10 / 12 / 2012

Mailing Address 100 Indiana Avenue, N.W.

Amount
674.39

City State Zip Code
Washington DC 20001

Transaction ID : D463975

Purpose of Expenditure In Kind Staff
Category/Type **001**

Office Sought: House State: WI
 Senate District: 00
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
TAMMY BALDWIN

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
171087.50

Disbursement For: Primary General
 Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee
AFSCME Special Account

Date
MM / DD / YYYY
10 / 12 / 2012

Mailing Address 1625 L Street, NW

Amount
721.51

City State Zip Code
Washington DC 20036

Transaction ID : D463976

Purpose of Expenditure In Kind Staff
Category/Type **001**

Office Sought: House State: NV
 Senate District: 03
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
JOHN OCEGUERA

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
22460.63

Disbursement For: Primary General
 Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1395.90
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date MM / DD / YYYY
10 / 14 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div> <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div> </div>
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">721.51</div>
City Washington State DC Zip Code 20036	Transaction ID : D463977	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">53970.73</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div> <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div> </div>	
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">721.51</div>	
City Washington State DC Zip Code 20036		Transaction ID : D463978	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Shelley Berkley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">16399.56</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1443.02</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 721.51 </div>
City Washington State DC Zip Code 20036	Transaction ID : D463979	
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE HECK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 22460.63 </div>		2012

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1383.94 </div>
City Washington State DC Zip Code 20036		Transaction ID : D463980
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KEITH ROTHFUS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 93173.00 </div>		2012

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2105.45 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2105.45 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y Y Y
10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1383.94</div>
City Washington State DC Zip Code 20036	Transaction ID : D463981	
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">81177.57</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1383.94</div>
City Washington State DC Zip Code 20036	Transaction ID : D463982	
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bob Casey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">81177.57</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2767.88</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; margin-right: 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin-right: 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1383.94</div>
City Washington State DC Zip Code 20036	Transaction ID : D463983	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">93173.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1517.47</div>	
City Beltsville State MD Zip Code 20705		Transaction ID : D463984	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">2901.41</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1517.47</div>
City State Zip Code Beltsville MD 20705	Transaction ID : D463985	
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 1775 K Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1778.60</div>
City State Zip Code Washington DC 20006-1598		Transaction ID : D463986
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">171087.50</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">3296.07</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 1775 K Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1778.60</div>
City Washington State DC Zip Code 20006-1598		
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">171087.50</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D463987

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 1300 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2026.94</div>
City Washington State DC Zip Code 20005		
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D463988

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">3805.54</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 1300 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2026.94</div>
City Washington State DC Zip Code 20005	Transaction ID : D463989	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 1775 K Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2127.77</div>
City Washington State DC Zip Code 20006-1598		Transaction ID : D463990
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">4154.71</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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Y Y Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 1775 K Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> M M M M . M M 2127.77 </div>
City Washington State DC Zip Code 20006-1598	Transaction ID : D463991	
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 908266.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> M M M M . M M 2457.49 </div>
City Washington State DC Zip Code 20001		Transaction ID : D463992
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 908266.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> M M M M . M M 4585.26 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> M M M M . M M </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> M M M M . M M </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">10 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">12 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">2012</div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2457.49</div>
City Washington State DC Zip Code 20001	Transaction ID : D463993	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">10 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">12 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">2012</div>
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2942.47</div>
City Washington State DC Zip Code 20036		Transaction ID : D463994
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">295811.03</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">5399.96</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2942.47</div>
City Washington State DC Zip Code 20036	Transaction ID : D463995	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">100465.44</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2942.47</div>
City Washington State DC Zip Code 20036		Transaction ID : D463996
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">295811.03</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	5884.94
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 2942.47 </div>
City Washington State DC Zip Code 20036	Transaction ID : D463997	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Charlie Wilson		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 100465.44 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 3819.97 </div>
City Washington State DC Zip Code 20036		Transaction ID : D463998
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 215103.61 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 6762.44 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y
 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div> <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div> </div>
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">3819.97</div>
City Washington State DC Zip Code 20036	Transaction ID : D463999	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">215103.61</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div> <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div> </div>
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">8867.89</div>
City Washington State DC Zip Code 20036		Transaction ID : D464000
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	12687.86
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 1625 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 8867.89 </div>
City Washington State DC Zip Code 20036	Transaction ID : D464001	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Voices of the American Federation of Government Employees		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>	
Mailing Address 80 F Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 13.60 </div>	
City Washington State DC Zip Code 20001		Transaction ID : D464002	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">295811.03</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">8881.49</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Voices of the American Federation of Government Employees		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 80 F Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">13.60</div>
City Washington	State DC	Zip Code 20001
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">001</div>	Transaction ID : D464003 Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">100465.44</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Voices of the American Federation of Government Employees		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 80 F Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">13.60</div>
City Washington	State DC	Zip Code 20001
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">001</div>	Transaction ID : D464004 Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">295811.03</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">27.20</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

Signature _____ [Electronically Filed] Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Voices of the American Federation of Government Employees		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y</div>
Mailing Address 80 F Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">13.60</div>
City Washington	State DC	Zip Code 20001
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Charlie Wilson		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">100465.44</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D464005

Full Name (Last, First, Middle Initial) of Payee Central Pennsylvania Area Labor Federation, AFL-CIO		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y</div>
Mailing Address 4031 Executive Park Drive		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">22.95</div>
City Harrisburg	State PA	Zip Code 17111
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D464006

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">36.55</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

Signature

[Electronically Filed]

Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Central Pennsylvania Area Labor Federation, AFL-CIO		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y</div>
Mailing Address 4031 Executive Park Drive		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">22.95</div>
City Harrisburg State PA Zip Code 17111	Transaction ID : D464007	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KEITH ROTHFUS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">93173.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Central Pennsylvania Area Labor Federation, AFL-CIO		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Mailing Address 4031 Executive Park Drive		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">22.95</div>	
City Harrisburg State PA Zip Code 17111		Transaction ID : D464008	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">81177.57</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">45.90</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Central Pennsylvania Area Labor Federation, AFL-CIO		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 4031 Executive Park Drive		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 22.95 </div>
City Harrisburg State PA Zip Code 17111	Transaction ID : D464009	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bob Casey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 81177.57 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Central Pennsylvania Area Labor Federation, AFL-CIO		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 4031 Executive Park Drive		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 22.95 </div>
City Harrisburg State PA Zip Code 17111	Transaction ID : D464010	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 908266.65 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 45.90 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y Y Y
10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Central Pennsylvania Area Labor Federation, AFL-CIO		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 4031 Executive Park Drive		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">22.95</div>
City Harrisburg State PA Zip Code 17111	Transaction ID : D464011	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">93173.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 555 New Jersey Ave. N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">33.33</div>
City Washington State DC Zip Code 20001	Transaction ID : D464012	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN OCEGUERA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">22460.63</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">56.28</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 555 New Jersey Ave. N.W.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 33.33 </div>
City Washington State DC Zip Code 20001	Transaction ID : D464013	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 53970.73 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 555 New Jersey Ave. N.W.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 33.33 </div>
City Washington State DC Zip Code 20001		Transaction ID : D464014
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Shelley Berkley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 16399.56 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 66.66 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y
 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 555 New Jersey Ave. N.W.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 33.33 </div>
City Washington State DC Zip Code 20001	Transaction ID : D464015	
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE HECK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 22460.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 501 3RD STREET, NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 37.77 </div>
City Washington State DC Zip Code 20001		Transaction ID : D464016
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN OCEGUERA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 22460.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 71.10 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 501 3RD STREET, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 37.77 </div>
City Washington State DC Zip Code 20001	Transaction ID : D464017	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 908266.65 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 501 3RD STREET, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 37.77 </div>
City Washington State DC Zip Code 20001	Transaction ID : D464018	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 53970.73 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 75.54 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y
 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee
COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Date

M M M

 /

D D D

 /

Y Y Y Y Y Y Y Y

Mailing Address **501 3RD STREET, NW**

Amount

37.77

City State Zip Code
 Washington DC 20001

Transaction ID : D464019

Purpose of Expenditure In Kind Staff
 Category/Type 001

Office Sought: House State: NV
 Senate District: _____
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
 Shelley Berkley

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought

16399.56

Disbursement For: Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Date

M M M

 /

D D D

 /

Y Y Y Y Y Y Y Y

Mailing Address **501 3RD STREET, NW**

Amount

37.77

City State Zip Code
 Washington DC 20001

Transaction ID : D464020

Purpose of Expenditure In Kind Staff
 Category/Type 001

Office Sought: House State: _____
 Senate District: 00
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
 Barack Obama

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought

908266.65

Disbursement For: Primary General
 Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">75.54</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

Signature _____ [Electronically Filed] Date

M M M

 /

D D D

 /

Y Y Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 501 3RD STREET, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">37.77</div>
City Washington State DC Zip Code 20001	Transaction ID : D464021	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE HECK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">22460.63</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 1325 Massachusetts Ave. NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">37.78</div>
City Washington State DC Zip Code 20005	Transaction ID : D464022	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">295811.03</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">75.55</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>					
Mailing Address 1325 Massachusetts Ave. NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">37.78</div>					
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005</td> </tr> </table>		City	State	Zip Code	Washington	DC
City	State	Zip Code				
Washington	DC	20005				
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President				
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose				
Calendar Year-To-Date Per Election for Office Sought 100465.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				

Transaction ID : D464023

Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>					
Mailing Address 1325 Massachusetts Ave. NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">37.78</div>					
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005</td> </tr> </table>		City	State	Zip Code	Washington	DC
City	State	Zip Code				
Washington	DC	20005				
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President				
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose				
Calendar Year-To-Date Per Election for Office Sought 295811.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				

Transaction ID : D464024

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">75.56</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)

Date

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2012

Mailing Address 1325 Massachusetts Ave. NW

Amount

37.78

City Washington	State DC	Zip Code 20005
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Transaction ID : D464025

Purpose of Expenditure In Kind Staff	Category/ Type	001
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Office Sought: House State: OH
 Senate District: 06
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
Charlie Wilson

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought	100465.44
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Disbursement For: Primary General
 Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee
APWU Separate Segregated Super PAC Account

Date

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2012

Mailing Address 1300 L Street, NW

Amount

38.11

City Washington	State DC	Zip Code 20005
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Transaction ID : D464026

Purpose of Expenditure In Kind Staff	Category/ Type	001
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Office Sought: House State: PA
 Senate District: 12
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
KEITH ROTHFUS

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought	93173.00
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Disbursement For: Primary General
 Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	75.89
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 1300 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 38.11 </div>
City Washington State DC Zip Code 20005	Transaction ID : D464027	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 81177.57 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 1300 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 38.11 </div>
City Washington State DC Zip Code 20005		Transaction ID : D464028
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bob Casey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 81177.57 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 76.22 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y
 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account		Date <div style="border: 1px solid black; padding: 2px;"> 10 / 12 / 2012 </div>
Mailing Address 1300 L Street, NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">38.11</div>
City Washington State DC Zip Code 20005	Transaction ID : D464029	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">93173.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)		Date <div style="border: 1px solid black; padding: 2px;"> 10 / 12 / 2012 </div>
Mailing Address 1325 Massachusetts Ave. NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">51.79</div>
City Washington State DC Zip Code 20005		Transaction ID : D464030
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">215103.61</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">89.90</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>					
Mailing Address 1325 Massachusetts Ave. NW	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">51.79</div>					
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005</td> </tr> </table>		City	State	Zip Code	Washington	DC
City	State	Zip Code				
Washington	DC	20005				
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President				
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose				
Calendar Year-To-Date Per Election for Office Sought 215103.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				

Transaction ID : D464031

Full Name (Last, First, Middle Initial) of Payee Voices of the American Federation of Government Employees	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>					
Mailing Address 80 F Street, NW	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">78.28</div>					
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20001</td> </tr> </table>		City	State	Zip Code	Washington	DC
City	State	Zip Code				
Washington	DC	20001				
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President				
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN OCEGUERA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose				
Calendar Year-To-Date Per Election for Office Sought 22460.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				

Transaction ID : D464032

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">130.07</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Voices of the American Federation of Government Employees		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 80 F Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 78.28 </div>
City Washington State DC Zip Code 20001	Transaction ID : D464033	
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 53970.73 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Voices of the American Federation of Government Employees		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 80 F Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 78.28 </div>
City Washington State DC Zip Code 20001		Transaction ID : D464034
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Shelley Berkley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 16399.56 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 156.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Voices of the American Federation of Government Employees		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 80 F Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">78.28</div>
City Washington State DC Zip Code 20001	Transaction ID : D464035	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE HECK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">22460.63</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Voices of the American Federation of Government Employees		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 80 F Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">91.88</div>
City Washington State DC Zip Code 20001		Transaction ID : D464036
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">170.16</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Voices of the American Federation of Government Employees		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 80 F Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">91.88</div>
City Washington	State DC	Zip Code 20001
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: <u>00</u> <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : D464037

Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 555 New Jersey Ave. N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">102.30</div>
City Washington	State DC	Zip Code 20001
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: <u>WI</u> <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">171087.50</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : D464038

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">194.18</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

Signature

[Electronically Filed]

Date

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10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 555 New Jersey Ave. N.W.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">102.30</div>
City Washington State DC Zip Code 20001	Transaction ID : D464039	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">171087.50</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 1775 K Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">110.16</div>
City Washington State DC Zip Code 20006-1598		Transaction ID : D464040
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KEITH ROTHFUS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">93173.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">212.46</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>

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Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
Mailing Address 1775 K Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">110.16</div>	
City Washington	State DC		Zip Code 20006-1598
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">81177.57</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D464041

Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
Mailing Address 1775 K Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">110.16</div>	
City Washington	State DC		Zip Code 20006-1598
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Bob Casey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">81177.57</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D464042

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">220.32</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

Signature _____ [Electronically Filed] Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y </div>
Mailing Address 1775 K Street, NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">110.16</div>
City Washington State DC Zip Code 20006-1598	Transaction ID : D464043	
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 93173.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y </div>
Mailing Address 555 New Jersey Ave. N.W.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">135.18</div>
City Washington State DC Zip Code 20001		Transaction ID : D464044
Purpose of Expenditure In Kind Staff	Category/Type 001	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 215103.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	245.34
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date M M / D D / Y Y Y Y
10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">10 / 12 / 2012</div>
Mailing Address 555 New Jersey Ave. N.W.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">135.18</div>
City Washington State DC Zip Code 20001		
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">215103.61</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D464045

Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">10 / 12 / 2012</div>
Mailing Address 1325 Massachusetts Ave. NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">145.83</div>
City Washington State DC Zip Code 20005		
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN OCEGUERA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">22460.63</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D464046

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">281.01</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

Signature _____ [Electronically Filed] Date

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

10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)

Date

M M /	D D /	Y Y Y Y
10	12	2012

Mailing Address 1325 Massachusetts Ave. NW

Amount

145.83

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Transaction ID : D464047

Purpose of Expenditure In Kind Staff	Category/ Type 001
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Office Sought: House State: NV
 Senate District: 00
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
DEAN HELLER

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought	53970.73
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Disbursement For: Primary General
 Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)

Date

M M /	D D /	Y Y Y Y
10	12	2012

Mailing Address 1325 Massachusetts Ave. NW

Amount

145.83

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Transaction ID : D464048

Purpose of Expenditure In Kind Staff	Category/ Type 001
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Office Sought: House State: NV
 Senate District:
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
Shelley Berkley

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought	16399.56
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Disbursement For: Primary General
 Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	291.66
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

M M /	D D /	Y Y Y Y
10	14	2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 1325 Massachusetts Ave. NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">145.83</div>
City Washington State DC Zip Code 20005	Transaction ID : D464049	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE HECK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">22460.63</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">152.25</div>
City Beltsville State MD Zip Code 20705	Transaction ID : D464050	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">215103.61</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">298.08</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

M M M

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D D D

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Y Y Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">152.25</div>
City State Zip Code Beltsville MD 20705	Transaction ID : D464051	
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">215103.61</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 1775 K Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">193.65</div>
City State Zip Code Washington DC 20006-1598		Transaction ID : D464052
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">295811.03</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">345.90</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Extras, Inc.		Date MM / DD / YYYY 10 / 12 / 2012
Mailing Address 151 East Lost Toritos		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">373.36</div>
City Weslaco	State TX	
Zip Code 78596	Transaction ID : D464102	
Purpose of Expenditure Canvassers	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Shelley Berkley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">16399.56</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Extras, Inc.		Date MM / DD / YYYY 10 / 12 / 2012
Mailing Address 151 East Lost Toritos		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">373.36</div>
City Weslaco	State TX	
Zip Code 78596	Transaction ID : D464103	
Purpose of Expenditure Canvassers	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">746.72</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

Signature _____ [Electronically Filed] Date MM / DD / YYYY
10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Extras, Inc.		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 151 East Lost Toritos		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 373.36 </div>
City Weslaco State TX Zip Code 78596	Transaction ID : D464104	
Purpose of Expenditure Canvassers	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN OCEGUERA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 22460.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Extras, Inc.		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 151 East Lost Toritos		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 373.36 </div>
City Weslaco State TX Zip Code 78596	Transaction ID : D464105	
Purpose of Expenditure Canvassers	Category/Type 001	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 908266.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 746.72 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER C C00484287
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Extras, Inc.		Date 10 / 12 / 2012
Mailing Address 151 East Lost Toritos		Amount 373.36
City Weslaco	State TX	Zip Code 78596
Purpose of Expenditure Canvassers	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 53970.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Extras, Inc.		Date 10 / 12 / 2012
Mailing Address 151 East Lost Toritos		Amount 373.36
City Weslaco	State TX	Zip Code 78596
Purpose of Expenditure Canvassers	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE HECK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 22460.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	746.72
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
Signature [Electronically Filed] Date 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Field Works		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 2852 Connecticut Avenue, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1852.89</div>
City Washington State DC Zip Code 20008		
Purpose of Expenditure Canvassers	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : D464108

Full Name (Last, First, Middle Initial) of Payee Field Works		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>
Mailing Address 2852 Connecticut Avenue, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1852.89</div>
City Washington State DC Zip Code 20008		
Purpose of Expenditure Canvassers	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : D464110

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">3705.78</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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Y Y Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 1775 K Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">193.65</div>
City Washington State DC Zip Code 20006-1598	Transaction ID : D464053	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">100465.44</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>
Mailing Address 1775 K Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">193.65</div>
City Washington State DC Zip Code 20006-1598		Transaction ID : D464054
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">295811.03</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">387.30</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y</div>
Mailing Address 1775 K Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">193.65</div>
City Washington	State DC	Zip Code 20006-1598
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Charlie Wilson		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">100465.44</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D464055

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y</div>
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">194.36</div>
City Beltsville	State MD	Zip Code 20705
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KEITH ROTHFUS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">93173.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D464056

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">388.01</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

Signature

[Electronically Filed]

Date

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Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER C C00484287
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee
Plasterers' Cement Masons' & Shop Hands Political Action Committee

Date
MM / DD / YYYY
10 / 12 / 2012

Mailing Address **11720 Beltsville Drive #700**

Amount
194.36

City State Zip Code
Beltsville MD 20705

Transaction ID : **D464057**

Purpose of Expenditure In Kind Staff
Category/Type **001**

Office Sought: House State: **PA**
 Senate District: **00**
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
TOM SMITH

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought **81177.57**

Disbursement For: Primary General
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Plasterers' Cement Masons' & Shop Hands Political Action Committee

Date
MM / DD / YYYY
10 / 12 / 2012

Mailing Address **11720 Beltsville Drive #700**

Amount
194.36

City State Zip Code
Beltsville MD 20705

Transaction ID : **D464058**

Purpose of Expenditure In Kind Staff
Category/Type **001**

Office Sought: House State: **PA**
 Senate District: **00**
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
Bob Casey

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought **81177.57**

Disbursement For: Primary General
 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	388.72
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date **10 / 14 / 2012**

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 194.36 </div>
City State Zip Code Beltsville MD 20705	Transaction ID : D464059	
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 93173.00 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>	
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 218.69 </div>	
City State Zip Code Beltsville MD 20705		Transaction ID : D464060	
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 295811.03 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 413.05 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 413.05 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y Y Y
10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 10 / 12 / 2012 </div>
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 218.69 </div>
City State Zip Code Beltsville MD 20705	Transaction ID : D464061	
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 100465.44 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 10 / 12 / 2012 </div>
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 218.69 </div>
City State Zip Code Beltsville MD 20705	Transaction ID : D464062	
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 295811.03 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 437.38 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 437.38 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div> </div>
Mailing Address 11720 Beltsville Drive #700		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">218.69</div>
City State Zip Code Beltsville MD 20705	Transaction ID : D464063	
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Charlie Wilson		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">100465.44</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> / <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div> / <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div> </div>	
Mailing Address 555 New Jersey Ave. N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">219.19</div>	
City State Zip Code Washington DC 20001		Transaction ID : D464064	
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">295811.03</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">437.88</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div> <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div> </div>
Mailing Address 555 New Jersey Ave. N.W.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">219.19</div>
City Washington State DC Zip Code 20001	Transaction ID : D464065	
Purpose of Expenditure In Kind Staff	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">100465.44</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFL-CIO		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div> <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div> </div>	
Mailing Address 815 - 16th Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">6.21</div>	
City Washington State DC Zip Code 20006		Transaction ID : D464071	
Purpose of Expenditure Walk Packets	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Charlie Wilson		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">100465.44</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">225.40</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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14

2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee AFL-CIO		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 815 - 16th Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 26.16 </div>
City Washington State DC Zip Code 20006	Transaction ID : D464072	
Purpose of Expenditure Walk Packets	Category/Type 004	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 215103.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFL-CIO		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>	
Mailing Address 815 - 16th Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 26.16 </div>	
City Washington State DC Zip Code 20006		Transaction ID : D464073	
Purpose of Expenditure Walk Packets	Category/Type 004	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 215103.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 52.32 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

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Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y
 10 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee AFL-CIO		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">10 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">12 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">2012</div>
Mailing Address 815 - 16th Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">72.16</div>
City Washington	State DC	Zip Code 20006
Purpose of Expenditure Walk Packets	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">004</div>	Transaction ID : D464078 Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">171087.50</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFL-CIO		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">10 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">12 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">2012</div>
Mailing Address 815 - 16th Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">72.16</div>
City Washington	State DC	Zip Code 20006
Purpose of Expenditure Walk Packets	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">004</div>	Transaction ID : D464079 Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">171087.50</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">144.32</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

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2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee AFL-CIO		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div> <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div> </div>	
Mailing Address 815 - 16th Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">286.97</div>	
City Washington	State DC		Zip Code 20006
Purpose of Expenditure Walk Packets	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">295811.03</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D464080

Full Name (Last, First, Middle Initial) of Payee AFL-CIO		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div> <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div> </div>	
Mailing Address 815 - 16th Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">286.97</div>	
City Washington	State DC		Zip Code 20006
Purpose of Expenditure Walk Packets	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">295811.03</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D464081

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">573.94</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

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Ms. Elizabeth H Shuler

Signature _____ [Electronically Filed] Date

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2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 30px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee AFL-CIO		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div> <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div> </div>	
Mailing Address 815 - 16th Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">312.01</div>	
City Washington	State DC		Zip Code 20006
Purpose of Expenditure Walk Packets	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D464082

Full Name (Last, First, Middle Initial) of Payee AFL-CIO		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">10</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div> <div style="border: 1px solid black; padding: 2px; width: 60px; text-align: center;">2012</div> </div>	
Mailing Address 815 - 16th Street, NW		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">6.21</div>	
City Washington	State DC		Zip Code 20006
Purpose of Expenditure Walk Packets	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">100465.44</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D464083

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">318.22</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature [Electronically Filed] Date

10

14

2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee AFL-CIO		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">10 / 12 / 2012</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 815 - 16th Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; text-align: right;">312.01</div>
City Washington State DC Zip Code 20006	Transaction ID : D464084	
Purpose of Expenditure Walk Packets	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; text-align: right;">908266.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AFL-CIO		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">10 / 12 / 2012</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 815 - 16th Street, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; text-align: right;">2.41</div>
City Washington State DC Zip Code 20006	Transaction ID : D464085	
Purpose of Expenditure Walk Packets	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ALFRED J JR LAWSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; text-align: right;">11743.68</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; text-align: right;">314.42</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

Signature

[Electronically Filed]

Date

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

10 / 14 / 2012

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

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484287 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee AFL-CIO	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 815 - 16th Street, NW	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 2.41 </div>
City Washington State DC Zip Code 20006	Transaction ID : D464086
Purpose of Expenditure Walk Packets	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: WILLIAM STEVE II SOUTHERLAND	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 11743.68	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
City State Zip Code	Transaction ID : D464086
Purpose of Expenditure	Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure:	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 2.41 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 102438.56 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler
 Signature

 Date 10 / 14 / 2012

[Electronically Filed]