SCHEDULE E)		PAGE 1 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)		FEC IDENTIFICATION NUMBER ▼
Workers' Voice		C C00484287
Check If 24-hour report X 48-hour report	New report Amends report	rt filed on
Full Name (Last, First, Middle Initial) of Payee Field Works		Date
Mailing Address 2852 Connecticut Avenue, NV	W	10 16 2012 Amount
City Washington	State Zip Code DC 20008	1852.89 Transaction ID : D465003
Purpose of Expenditure Canvassers	Category/ Type 001	Office Sought: House State: Senate District: 00
Name of Federal Candidate Supported or Opp Barack Obama	posed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	1110412.30	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Field Works	•	Date 10 16 2012
Mailing Address 2852 Connecticut Avenue, NV	W	Amount
City Washington	State Zip Code DC 20008	1852.89 Transaction ID : D465004
Purpose of Expenditure Canvassers	Category/ Type 001	Office Sought: House State: Senate District: 00 President
Name of Federal Candidate Supported or Opp Willard Mitt Romney	posed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	1110412.30	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Exper	nditures	3705.78
(b) SUBTOTAL of Unitemized Independent Exp	penditures	•
(c) TOTAL Independent Expenditures		>
	andidate or authorized committee or agent of	not made in cooperation, consultation, or concert i either, or (if the reporting entity is not a political
Ms. Elizabeth H Shuler Signature	[Electronically Filed] Date	10 / 18 / 2012

(SCHEDULE E)	PAGE 2 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	filed on
Full Name (Last, First, Middle Initial) of Payee	
Extras, Inc.	Date
Mailing Address 151 East Lost Toritos	10 16 2012 Amount
City State Zip Code	7 tillount
Weslaco TX 78596	690.49 Transaction ID : D465618
Purpose of Expenditure Canvassers Category/ Type 001	Office Sought: House State: Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President ——
Barack Obama	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Extras, Inc.	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 151 East Lost Toritos	
	Amount
City State Zip Code Weslaco TX 78596	690.49
Purpose of Expenditure Category/	Transaction ID : D465619 Office Sought: House State:
Canvassers Odlogory Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Willard Mitt Romney	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1380.98
(b) SUBTOTAL of Unitemized Independent Expenditures	>
(c) TOTAL Independent Expenditures	•
	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were nowith, or at the request or suggestion of, any candidate or authorized committee or agent of 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 Y Y Y Y Y Y Y Y Y Y
Signature Date	10 18 2012

(SCHEDULE E)	PAGE 3 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report f	filed on M M M / D D / Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee	
Extras, Inc.	Date
Mailing Address 151 East Lost Toritos	10 16 2012 Amount
City. Chale 7:n Code	Amount
City State Zip Code Weslaco TX 78596	690.49
Purpose of Expenditure Canvassers Category/ Type 001	Transaction ID : D465620 Office Sought: House State: NV Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
	Check One: Support Oppose
	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Field Works	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2852 Connecticut Avenue, NW	Amount
City State Zip Code	7 tillodik
Washington DC 20008	1852.89
Purpose of Expenditure Category/ Type 001	Transaction ID : D465005 Office Sought: House State: VA Senate District: 00
	President District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY MICHAEL KAINE	Check One: Support Oppose
	Disbursement For: Primary General 012 Other (specify)
(a) CUDTOTAL of the size of body and set Emperations	25.42.20
(a) SUBTOTAL of Itemized Independent Expenditures	2543.38
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of e 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 Y Y Y Y Y Y Y Y Y Y
Signature [Electronically Filea] Date	10 18 2012

SCHEDULE E)	PAGE 4 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report 48-hour report New report Amends report filed or	1 M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Extras, Inc.	Date / Y Y Y Y Y
Mailing Address 151 East Lost Toritos	10 16 2012 Amount
City State Zip Code	unoun.
Weslaco TX 78596	690.50
	ansaction ID : D465621 Sought: House State: NV Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President — 00
DEAN HELLER Check	
Calendar Year-To-Date Per Election for Office Sought Disburs 2012	sement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Extras, Inc.	Date
Mailing Address 151 East Lost Toritos	10 16 2012
	Amount
City State Zip Code Weslaco TX 78596	690.50
Purpose of Expenditure Category/ Office S	ransaction ID : D465622 Sought: House State: NV
Canvassers Odlogory O01	Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: JOE HECK Check	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburs 2012	sement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1381.00
(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 with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012
Signature	

SCHEDULE E)	PAGE 5 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Extras, Inc.	Date
Mailing Address 151 East Lost Toritos	10 16 2012 Amount
City State Zip Code	Allount
Weslaco TX 78596	690.50 Transaction ID : D465623
	e Sought: House State: NV Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
JOHN OCEGUERA Chec	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbut 2012	ursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Mosaic	Date
Mailing Address 4801 Viewpoint Place	10 16 2012
·	Amount
City State Zip Code Cheverly MD 20781	2745.00
Description of Ferrorities	Transaction ID : D466285 e Sought: House State: OH
Fliers Category/ Type 004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President — Oppose
Sherrod Brown	k One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbuted 2012	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	3435.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(a) COLICINE OF CHICAL MACPORAGIN Experiances minimum	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10) 18 2012
Signature	

(SCHEDULE E)	PAGE 6 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	filed on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Mosaic	Date
	10 16 2012
Mailing Address 4801 Viewpoint Place	Annual Control
011	Amount
City State Zip Code Cheverly MD 20781	461.25
2.00	Transaction ID : D466286 Office Sought: House State:
Purpose of Expenditure Fliers Category/ Type 004	Canata
	President District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
Barack Obama	oneck one. Support Oppose
	Disbursement For: Primary General
for Office Sought 1110412.30	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mosaic	M M / D D / Y Y Y Y
Mailing Address 4801 Viewpoint Place	10 16 2012
Walling Address 4801 Viewpoint Place	Amount
City State Zip Code	
Cheverly MD 20781	461.25
Purpose of Expenditure Category/	Transaction ID : D466287 Office Sought: House State:
Fliers Type 004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President ————
Willard Mitt Romney	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
	Other (specify)
(a) CUDTOTAL of Booking delands and add Emparathers	200.50
(a) SUBTOTAL of Itemized Independent Expenditures	922.50
(b) CURTOTAL of Unitermized Independent Everenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(c) TOTAL Independent Experiatores	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	
[Electronically Filed] Date	10 18 2012
Signature	

(SCHEDULE E)	PAGE 7 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends r	report filed on
Full Name (Last, First, Middle Initial) of Payee South Central Federation of Labor	Date
Mailing Address 1602 South Park Street	10 / 16 / 2012
	Amount
City State Zip Code Madison WI 53715	21.43
	Transaction ID : D466288
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President —
Willard Mitt Romney	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
South Central Federation of Labor	10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1602 South Park Street	
	Amount
City State Zip Code Madison WI 53715	21.43
Purpose of Expenditure Category/ Ca	Transaction ID : D466289 Office Sought: House State: WI
In Kind Staff Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
TOMMY G THOMPSON	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 200558.54	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	> 42.86
(b) SUBTOTAL of Unitemized Independent Expenditures	····· >
(c) TOTAL Independent Expenditures	
(b) 101AL Independent Expenditures	······
Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or age party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	M = M / D = D / Y = Y = Y
[Electronically Filed] Signature	Date 10 18 2012

SCHEDULE E)	PAGE 8 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee South Central Federation of Labor	Date 10 16 2012
Mailing Address 1602 South Park Street	Amount
City State Zip Code Madison WI 53715	21.43
Purpose of Expenditure In Kind Staff Category/ Type Office	Sought: House State: WI Senate District: 00 President
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN Check	C One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbut 200558.54	rsement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee South Central Federation of Labor	Date 10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1602 South Park Street	Amount
	21.43 Transaction ID : D466291
In Kind Staff Type 001	Sought: House State: Senate District: 00 President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama Check	C One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbut 2012	rsement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	42.86
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date Signature	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE E)	PAGE 9 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Central Pennsylvania Area Labor Federation, AFL-CIO	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4031 Executive Park Drive Amou	unt
City State Zip Code	22.95
Harrisburg PA 17111	action ID : D466292
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sough	<u> </u>
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
Willard Mitt Romney Check One	
Calendar Year-To-Date Per Election for Office Sought 1110412.30 Disbursement 2012	ent For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Central Pennsylvania Area Labor Federation, AFL-CIO	M = M / D = D / Y = Y = Y
Mailing Address 4031 Executive Park Drive	10 16 2012
Amou	unt
City State Zip Code	22.95
	action ID : D466293
Purpose of Expenditure In Kind Staff Category/ Type O01	ght: House State: PA Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President
KEITH ROTHFUS Check One	e: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012	ent For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	45.90
(b) SUBTOTAL of Unitemized Independent Expenditures	
(4)	7 1 7 1 7
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012
Signature	لىتتىا

Image# 12972723073 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E) PA

SCHEDULE E)	PAGE 10 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	
	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	t filed on Man / Dad / Yayayay
Full Name (Last, First, Middle Initial) of Payee	Date
Central Pennsylvania Area Labor Federation, AFL-CIO	M M / D D / Y Y Y Y
Mailing Address 4031 Executive Park Drive	10 16 2012
4031 Executive Park Drive	Amount
City State Zip Code	
Harrisburg PA 17111	22.95
Purpose of Expenditure Category/ Category/	Transaction ID: D466294 Office Sought: House State: PA
In Kind Staff Outgoing Type Outgoing Outgo	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
TOM SMITH	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought	2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Central Pennsylvania Area Labor Federation, AFL-CIO	M M / D D / Y Y Y Y
Mailing Address 4031 Executive Park Drive	10 16 2012
	Amount
City State Zip Code	22.95
Harrisburg PA 17111	Transaction ID : D466295
Purpose of Expenditure Category/ In Kind Staff 001	Office Sought: House State: PA
lype	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President — Oppose
Bob Casey	Check One: Support Oppose
Calendar Year-To-Date Per Election 93268.99	Disbursement For: Primary General
for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	45.90
	7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	>
	7 7 7
(c) TOTAL Independent Expenditures	·
Under penalty of perjury I certify that the independent expenditures reported herein were n	not made in cooperation, consultation, or concert
with, or at the request or suggestion of, any candidate or authorized committee or agent of	
party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	M - M / D - D / Y - Y - Y - Y
Signature [Electronically Filed] Date	10 18 2012
Oignature	

SCHEDULE E)	PAGE 11 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	_
Central Pennsylvania Area Labor Federation, AFL-CIO	Date M M / D D / Y Y Y Y Y Y Y Y Y
Mailing Address 4031 Executive Park Drive	Amount
City State Zip Code	
Harrisburg PA 17111	22.95 Transaction ID : D466296
	e Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 00
	sk One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbution 1110412.30	ursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Central Pennsylvania Area Labor Federation, AFL-CIO	Date
Mailing Address 4031 Executive Park Drive	10 16 2012
	Amount
City State Zip Code Harrisburg PA 17111	22.95 Transaction ID : D466297
	e Sought: House State: PA Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President
MARK CRITZ Chec	ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disb	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	45.90
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date	0 18 2012
Signature	

NAME OF COMMITTE (In Full) Workers' Voice C C00484287 Check If 24-hour report	N NUMBER ▼
C C00484287 Check If 24-hour report	Y = Y = Y = Y
Check If 24-hour report	Y = Y = Y = Y
AFT Solidarity 527 Mailing Address 555 New Jersey Ave. N.W. City State Zip Code Washington DC 20001 Purpose of Expenditure In Kind Staff Category/ O01 Date Lity State Zip Code Category/ O01 Category/ O01 Category/ O01 Category/ Category/ O01 Category/	
AFT Solidarity 527 Mailing Address 555 New Jersey Ave. N.W. City State Zip Code Washington DC 20001 Purpose of Expenditure In Kind Staff Category/ O01 Date Lity State Zip Code Category/ O01 Category/ O01 Category/ O01 Category/ Category/ O01 Category/	
Mailing Address 555 New Jersey Ave. N.W. City State Zip Code Washington DC 20001 Transaction ID: D466298 Purpose of Expenditure In Kind Staff Category/ 001 Figure 001 Category/ 001 Category/ Category	
City State Zip Code Washington DC 20001 Purpose of Expenditure In Kind Staff Category/ O01 Category/ O01 Category/ O01 Category/ Category/ Category/ O01 Category/ Category/ Category/ O01	
Washington DC 20001 Transaction ID : D466298 Purpose of Expenditure In Kind Staff Category/ 001 Fine 001	
Washington DC 20001 Transaction ID : D466298 Purpose of Expenditure In Kind Staff Category/ 001 Fine Out	20.00
Purpose of Expenditure In Kind Staff Category/ Type 001 Category/ Category	33.33
In Kind Staff	State: NV
	District: 03
Name of Federal Candidate Supported or Opposed by Expenditure:	
JOHN OCEGUERA Check One: Support	Oppose
JOHN OCEGOERA	
Calendar Year-To-Date Per Election Disbursement For: Primary	General Control
for Office Sought 44315.38 2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Date	
AFT Solidarity 527	
	2012
Mailing Address 555 New Jersey Ave. N.W.	
Amount	
City State Zip Code	33.33
Washington DC 20001 Transaction ID : D466299	
Purpose of Expenditure Category/ Office Sought: House	State: NV
In Kind Staff Type 001 Senate	District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	
DEAN HELLER Check One: Support	X Oppose
Calendar Vear To Date Par Flortion Disbursement For: Primary	✓ General
63710 40 2012	Gerierai
for Office Sought Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	66.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(b) Total independent Experience	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation	
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is party committee) any political party committee or its agent.	
party committee) any political party committee or its agent.	

(SCHEDULE E)	PAGE 13 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report to	filed on The Date of the Date
Full Name (Last, First, Middle Initial) of Payee	Date
AFT Solidarity 527	Date
Mailing Address 555 New Jersey Ave. N.W.	10 16 / 2012
	Amount
City State Zip Code Washington DC 20001	33.33
5.7	Transaction ID : D466300
Purpose of Expenditure In Kind Staff Category/ Type Out Out Out Out Out Out Out Ou	Office Sought: House State: NV Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Shelley Berkley	Check One: Support Oppose
	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
AFT Solidarity 527	M M / D D / Y Y Y Y
Mailing Address 555 New Jersey Ave. N.W.	10 16 2012
	Amount
City State Zip Code	33.33
Washington DC 20001	Transaction ID : D466301
In Kind Stoff	Office Sought: House State: NV
Type 001	Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure:	President
JOE HECK	Check One: Support Oppose
	Disbursement For: Primary General O12 Other (specify)
ioi onice estigni	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	66.66
(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	M - M / D - D / Y - Y - Y - Y
[Electronically Filed] Date Signature	10 18 2012
g	

SCHEDULE E)	PAGE 14 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES	e
Mailing Address 501 3RD STREET, NW	10 16 2012 ount
City State Zip Code	
Washington DC 20001	37.77 saction ID : D466302
Purpose of Expenditure In Kind Staff Category/ Type Office Sor	ught: House State: NV Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN OCEGUERA Check Or	President ne: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursen	nent For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES	e 10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 501 3RD STREET, NW Am	ount
City State Zip Code	07.77
Washington DC 20001	37.77 saction ID : D466303
Purpose of Expenditure In Kind Staff Category/ Type Office So	ught: House State: Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney Check Or	President Description: Description:
Calendar Year-To-Date Per Election for Office Sought 5 1110412.30 Disburser 2012	nent For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	75.54
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1 1 7 1 7 1 7 1
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	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

(SCHEDULE E)	PAGE 15 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report	t filed on	
Full Name (Last, First, Middle Initial) of Payee COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES	Date 10 16 2012	
Mailing Address 501 3RD STREET, NW	Amount	
City State Zip Code Washington DC 20001	37.77 Transaction ID : D466304	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: NV Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER	Check One: President Oppose	
Calendar Year-To-Date Per Election 63710.40	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES	Date 10 16 2012	
Mailing Address 501 3RD STREET, NW	Amount	
City State Zip Code Washington DC 20001	37.77 Transaction ID : D466305	
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 42456.41	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	75.54	
(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 18 2012	
Signature		

SCHEDULE E)	PAGE 16 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES	M M / D D / Y Y Y Y
Mailing Address 501 3RD STREET, NW Amou	10 16 2012
City State Zip Code	
Washington DC 20001	37.77 action ID : D466306
Purpose of Expenditure In Kind Staff Category/ Type Office Soug	•
Name of Federal Candidate Supported or Opposed by Expenditure:	President —
Barack Obama Check One	: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012 O	ent For: Primary General other (specify)
Full Name (Last, First, Middle Initial) of Payee COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 501 3RD STREET, NW	10 16 2012
Атог	unt
City State Zip Code Washington DC 20001	37.77
Purpose of Expenditure Category/ Office Soug	action ID : D466307 yht: House State: NV
In Kind Staff Type 001	Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: JOE HECK Check One	President Support Oppose
Diahursama	
44315 38 2012	hther (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	75.54
(b) SUBTOTAL of Unitemized Independent Expenditures	
	77 1 77 1 77
(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	18 2012
Signature	

(SCHEDULE E)	PAGE 17 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report f	iled on O O O O O O O O O O O O O O O O O O	
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date	
Mailing Address 1325 Massachusetts Ave. NW	10	
City State Zip Code		
Washington DC 20005	37.78	
Purpose of Expenditure In Kind Staff Category/ Type 001	Transaction ID : D466308 Office Sought: House State: OH Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
JOSH MANDEL C	Check One: Support Oppose	
	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 10 16 2012	
Mailing Address 1325 Massachusetts Ave. NW	Amount	
City State Zip Code	27.70	
Washington DC 20005	37.78 Transaction ID : D466309	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: OH Senate District: 06	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
BILL JOHNSON	Check One: Support Oppose	
	Disbursement For: Primary General O12 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	75.56	
(b) SUBTOTAL of Unitemized Independent Expenditures	1171171171	
(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 18 2012	
Signature		

SCHEDULE E)	PAGE 18 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report	rt filed on
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date
	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1325 Massachusetts Ave. NW	Amount
City State Zip Code	
Washington DC 20005	37.78
Purpose of Expenditure	Transaction ID : D466310 Office Sought: House State: OH
In Kind Staff Category/ Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Sherrod Brown	Check One: Support Oppose
Calendar Year-To-Date Per Election 348953.86	Disbursement For: Primary General 2012
for Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date
NATIONAL AIR TRAITIO CONTROLLERS ASSOCIATION FOLITICAL ACTION COMMITTEE (ARA NATOA FAC)	10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1325 Massachusetts Ave. NW	10 10 2012
	Amount
City State Zip Code Washington DC 20005	37.78
	Transaction ID : D466311 Office Sought:
Purpose of Expenditure Category/ In Kind Staff 001	Senate
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 06
Charlie Wilson	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary X General
for Office Sought	2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	75.56
	7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	•
(c) TOTAL Independent Expenditures	>
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent or party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	M = M / D = D / Y = Y = Y
[Electronically Filed] Date Signature	10 18 2012
-	

SCHEDULE E)	PAGE 19 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	filed on M M M / D D / Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account	Date 10 16 2012
Mailing Address 1300 L Street, NW	Amount
City State Zip Code	20,44
Washington DC 20005	38.11 Transaction ID : D466312
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: PA Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President
KEITH ROTHFUS	Check One: Support Oppose
Calcillat real-10-bate fet election	Disbursement For: Primary General O12 Other (specify)
Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account	Date 10 16 2012
Mailing Address 1300 L Street, NW	Amount
City State Zip Code	20.44
Washington DC 20005	38.11 Transaction ID : D466313
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: PA Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
TOM SMITH	Check One: Support Oppose
	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	76.22
(b) SUBTOTAL of Unitemized Independent Expenditures	>
(c) TOTAL Independent Expenditures	·
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of a party committee) any political party committee or its agent.	·
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 18 2012
Signature	

SCHEDULE E)	PAGE 20 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report	M = M / D = D / Y = Y = Y
APWU Separate Segregated Super PAC Account	ate 10 16 7 2012
Mailing Address 1300 L Street, NW	mount
City State Zip Code Washington DC 20005	38.11
Purpose of Expenditure In Kind Staff Category/ Type O01	<u> </u>
Name of Federal Candidate Supported or Opposed by Expenditure: Bob Casey Check C	
Calendar Year-To-Date Per Election for Office Sought 93268.99 Disburse 2012	ement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account Mailing Address 1300 L Street, NW	ate 10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	mount
	38.11 ansaction ID : D466315
Purpose of Expenditure In Kind Staff Category/ Type 001	Sought: House State: PA Senate District: 12 President
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ Check C	
Calendar Year-To-Date Per Election for Office Sought Disburse 2012	ement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	76.22
(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 with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date Signature	18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE E)	PAGE 21 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Metropolitan Washington Council, AFL-CIO	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 888 16th Street, NW, Ste. 520	mount
City State Zip Code	
Washington DC 20006	43.27 ansaction ID : D466316
Purpose of Expenditure Category/ Office S	
In Kind Staff 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President Once
Willard Mitt Romney Check	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburs 2012	ement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Metropolitan Washington Council, AFL-CIO	M / D D / Y Y Y
Mailing Address 888 16th Street, NW, Ste. 520	10 16 2012
	mount
City State Zip Code	43.27
	ansaction ID : D466317
Purpose of Expenditure In Kind Staff Category/ Type Office S	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
TOMMY G THOMPSON Check	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburs 200558.54	ement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	86.54
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7 7
(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	18 2012
Signature	

SCHEDULE E)	PAGE 22 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	**
Full Name (Last, First, Middle Initial) of Payee Metropolitan Washington Council, AFL-CIO	
Mailing Address 888 16th Street, NW, Ste. 520	10 16 Y 2012
Amoun	nt
City State Zip Code Washington DC 20006	43.27 ction ID : D466318
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sough	•
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
TAMMY BALDWIN Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought 200558.54 Disbursement 2012 Other	nt For: Primary General
	M / D D / Y Y Y Y
Mailing Address 888 16th Street, NW, Ste. 520 Amoun	10 16 2012
City State Zip Code	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Washington DC 20006	43.27 ction ID : D466319
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sough	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
Barack Obama Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1110412.30 Disbursement 2012 Oth	nt For: Primary General
(a) SUBTOTAL of Itemized Independent Expenditures	86.54
(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	18 2012
Signature	

SCHEDULE E)	PAGE 23 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee OHIO COUNCIL 8 AMERICAN FED OF ST CTY AND MUNI EMPLOYEES (AFSCME) AFL-CIO IE PAC	Date
Mailing Address 6800 NORTH HIGH STREET	10 / 16 / 2012 Amount
City State Zip Code	
Worthington OH 43085	46.07 ransaction ID : D466320
	Sought: House State: Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney Check	President One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1110412.30 Disbur 2012	rsement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee OHIO COUNCIL 8 AMERICAN FED OF ST CTY AND MUNI EMPLOYEES (AFSCME) AFL-CIO IE PAC	Date 10 16 2012
Mailing Address 6800 NORTH HIGH STREET	10 16 2012 Amount
City State Zip Code	
Worthington OH 43085	46.07 Transaction ID : D466321
	Sought: House State: OH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL Check	President One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbur 2012	rsement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	92.14
(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	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

(SCHEDULE E)	PAGE 24 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends repo	rt filed on	
Full Name (Last, First, Middle Initial) of Payee OHIO COUNCIL 8 AMERICAN FED OF ST CTY AND MUNI EMPLOYEES (AFSCME) AFL-CIO IE PA	M - M / D - D / Y - Y - Y	
Mailing Address 6800 NORTH HIGH STREET	10	
City State Zip Code		
Worthington OH 43085	46.07 Transaction ID : D466322	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: OH Senate District: 06	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON	Check One: Support Oppose	
BILL SOLINGON		
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee OHIO COUNCIL 8 AMERICAN FED OF ST CTY AND MUNI EMPLOYEES (AFSCME) AFL-CIO IE PAC	Date 10 16 7 2012	
Mailing Address 6800 NORTH HIGH STREET	Amount	
City State Zip Code	40.07	
Worthington OH 43085	46.07 Transaction ID : D466323	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: OH Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
Sherrod Brown	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought 348953.86	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	92.14	
(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 18 2012	
Signature	.5 .5 .2012	

SCHEDULE E)	PAGE 25 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends repo	rt filed on	
Full Name (Last, First, Middle Initial) of Payee OHIO COUNCIL 8 AMERICAN FED OF ST CTY AND MUNI EMPLOYEES (AFSCME) AFL-CIO IE PA	M - M / D - D / Y - Y - Y	
Mailing Address 6800 NORTH HIGH STREET	10	
City State Zip Code		
Worthington OH 43085	46.07 Transaction ID : D466324	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: OH Senate District: 06	
Name of Federal Candidate Supported or Opposed by Expenditure: Charlie Wilson	President Check One: Support Oppose	
Charle Wilson	onesis ones States	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee OHIO COUNCIL 8 AMERICAN FED OF ST CTY AND MUNI EMPLOYEES (AFSCME) AFL-CIO IE PAC	Date 10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 6800 NORTH HIGH STREET	Amount	
City State Zip Code	40.07	
Worthington OH 43085	46.07 Transaction ID : D466325	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
Barack Obama	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	92.14	
(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 18 2012	
Signature	.5 10 2012	

(SCHEDULE E)	PAGE 26 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report	t filed on	
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date	
Mailing Address 1325 Massachusetts Ave. NW	10	
City State Zip Code		
Washington DC 20005	51.79	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: FL Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
CONNIE MACK	Check One: Support Oppose	
Calendar Year-To-Date Per Election 256429.75 for Office Sought	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 10 16 2012	
Mailing Address 1325 Massachusetts Ave. NW	Amount	
City State Zip Code	51.70	
Washington DC 20005	51.79 Transaction ID : D466327	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: FL Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
BILL NELSON	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	103.58	
(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 18 2012	
Signature		

SCHEDULE E)	PAGE 27 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
	G 600484287	
Check If 24-hour report 48-hour report New report Amends report	filed on Man / Dab / Yayayay	
Full Name (Last, First, Middle Initial) of Payee OAPSE/AFSCME Local 4	Date	
Mailing Address 6805 Oak Creek Drive	10 / 16 / 2012 Amount	
City State Zip Code	Amount	
Columbus OH 43229	58.21	
Divinace of Evinanditure	Transaction ID : D466328 Office Sought: House State:	
In Kind Staff Category/ Type O01	Senate	
	President District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney	Check One: Support Oppose	
Laterial real-10-Date Fer Election	Disbursement For: Primary General 2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date	
OAPSE/AFSCME Local 4	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 6805 Oak Creek Drive	10 10 2012	
	Amount	
City State Zip Code	58.21	
Columbus OH 43229	Transaction ID : D466329	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: OH Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
JOSH MANDEL	Check One: Support Oppose	
	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	116.42	
(b) SUBTOTAL of Unitemized Independent Expenditures	·	
(a) TOTAL ladanandash Funandihura		
(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 18 2012	
Signature		

SCHEDULE E)	PAGE 28 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y	
Check II 24-Hour report 40-Hour report Mew report Americas report lifed on		
Full Name (Last, First, Middle Initial) of Payee OAPSE/AFSCME Local 4	ate	
Mailing Address 6805 Oak Creek Drive	10 16 2012 mount	
City State Zip Code		
Columbus OH 43229	58.21 Insaction ID : D466330	
Purpose of Expenditure In Kind Staff Category/ Type 001	Senate District: 06	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
BILL JOHNSON Check (
Calendar Year-To-Date Per Election for Office Sought 144970.16 Disburse 2012	ement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee OAPSE/AFSCME Local 4	ate M	
Mailing Address 6805 Oak Creek Drive	10 10 2012	
Al	mount	
City State Zip Code Columbus OH 43229	58.21	
Purpose of Expenditure In Kind Staff Category/ Type Office S		
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
Sherrod Brown Check C	One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disburse 2012	ement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	116.42	
(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	18 2012	
Signature		

SCHEDULE E)	PAGE 29 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee OAPSE/AFSCME Local 4	ate	
Mailing Address 6805 Oak Creek Drive	10 16 2012 mount	
City State Zip Code		
Columbus OH 43229	58.21 Insaction ID : D466332	
Purpose of Expenditure In Kind Staff Category/ Type 001	Senate District: 06	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
Charlie Wilson Check C		
Calendar Year-To-Date Per Election for Office Sought Disburse 2012	ement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee OAPSE/AFSCME Local 4	ate	
Mailing Address 6805 Oak Creek Drive	10 16 2012	
Ar	mount	
City State Zip Code Columbus OH 43229	58.21	
Purpose of Expenditure In Kind Staff Category/ Type Office S		
Name of Federal Candidate Supported or Opposed by Expenditure:	President - 00	
Barack Obama Check C	One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disburse 2012	ement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	116.42	
(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	18 2012	
Signature		

SCHEDULE E)	PAGE 30 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee		
Voices of the American Federation of Government Employees	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 80 F Street, NW	mount	
City State Zip Code		
Washington DC 20001	78.28	
Purpose of Expenditure In Kind Staff Category/ Type O01		
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
JOHN OCEGUERA Check C		
Calendar Year-To-Date Per Election for Office Sought Disburse 2012	ement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Voices of the American Federation of Government Employees	ate	
Mailing Address 80 F Street, NW	10 16 2012	
A	mount	
City State Zip Code	78.28	
	ansaction ID : D466335	
Purpose of Expenditure In Kind Staff Category/ Type Office S	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President —	
Willard Mitt Romney Check C	One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disburse 2012	ement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	156.56	
(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	18 2012	
Signature		

(SCHEDULE E)				PAGE 31 OF FOR SE OF FORM	101 24/48
NAME OF COMMITTE (In Full)				EC IDENTIFICATION NUI	MBER ▼
Workers' Voice				C C00484287	
Check If 24-hour report X 48-hour	report New	report Amends repo	ort filed on	M / D D / Y Y	= Y = Y
Full Name (Last, First, Middle Initial) of	Payee				
Voices of the American Fe	-	ernment Employee	M)12
Mailing Address 80 F Street, NW			Amoun		
City	State	Zip Code			70.00
Washington	DC	20001			78.28
Purpose of Expenditure In Kind Staff		Category/ Type 001	Office Sought	tion ID : D466336 : House State Senate District	
Name of Federal Candidate Supported	or Opposed by Expend	liture:	-	President	
DEAN HELLER			Check One:		ppose
Calendar Year-To-Date Per Election for Office Soug		63710.40	Disbursement 2012 Oth	er (specify)	eneral
Full Name (Last, First, Middle Initial) of	Payee		Date		
Voices of the American Fed	eration of Goverr	nment Employees	- M	M / D D / Y Y	YYY
Mailing Address 80 F Street, NW)12
			Amoun	İ	
City Washington	State DC	Zip Code 20001	Transac	tion ID : D466337	78.28
Purpose of Expenditure In Kind Staff		Category/ Type 001	Office Sough		
Name of Federal Candidate Supported	or Opposed by Expend	liture:	_	President	
Shelley Berkley			Check One:	Support C	ppose
Calendar Year-To-Date Per Electi for Office Souç		42456.41	Disbursement 2012 Oth	er (specify)	eneral
(a) SUBTOTAL of Itemized Independent	Expenditures		•	156	5.56
(b) SUBTOTAL of Unitemized Independ	ent Expenditures		•	7	-
(c) TOTAL Independent Expenditures			•	7 1 7 1	-
Under penalty of perjury I certify that the with, or at the request or suggestion of, party committee) any political party committee.	any candidate or autho				
Ms. Elizabeth H Shuler	[Elec	ctronically Filed] Date	M M /	18 2012	
Signature	2	Jake		2012	l

SCHEDULE E)	PAGE 32 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report	filed on M M M / D D / Y Y Y Y Y Y	
Full Name (Last, First, Middle Initial) of Payee		
Voices of the American Federation of Government Employees	Date 10 16 2012	
Mailing Address 80 F Street, NW	Amount	
City State Zip Code		
Washington DC 20001	78.28 Transaction ID : D466338	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
Barack Obama	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Voices of the American Federation of Government Employees	Date 10 16 2012	
Mailing Address 80 F Street, NW	Amount	
City State Zip Code		
Washington DC 20001	78.28 Transaction ID : D466339	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: NV Senate District: 03	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
JOE HECK	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	156.56	
(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 18 2012	
Signature		

(SCHEDULE E)	PAGE 33 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report	filed on M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee	Data	
SEIU Local 13	Date	
Mailing Address 345 Randolph Avenue, Suite 100	10 16 2012	
	Amount	
City State Zip Code Saint Paul MN 55102	90.84	
Purpose of Expenditure Category/	Transaction ID : D466340 Office Sought: House State:	
In Kind Staff Category/ Type O01	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	Y President	
Willard Mitt Romney	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date	
SEIU Local 13	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 345 Randolph Avenue, Suite 100	10 16 2012	
	Amount	
City State Zip Code Saint Paul MN 55102	90.84	
Purpose of Expenditure In Kind Staff Category/ 001	Transaction ID : D466341 Office Sought: House State: WI	
Type	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose	
TOMMY G THOMPSON		
Calendar Year-To-Date Per Election 200558.54	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	181.68	
(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	M M / D D / Y Y Y Y Y	
[Electronically Filed] Date Signature	10 18 2012	

SCHEDULE E)	PAGE 34 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee		
SEIU Local 13	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 345 Randolph Avenue, Suite 100 Amou		
City State Zip Code		
Saint Paul MN 55102	90.84 action ID : D466342	
Purpose of Expenditure In Kind Staff Category/ Type 001	ght: House State: WI Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
TAMMY BALDWIN Check One	e: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disburseme 200558.54	ent For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee SEIU Local 13	M M / D D / Y Y Y Y	
Mailing Address 345 Randolph Avenue, Suite 100	10 16 2012	
Amou	unt	
City State Zip Code	90.84	
Saint Paul MN 55102 Trans	action ID : D466343	
Purpose of Expenditure In Kind Staff Category/ Type 001	ght: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
Barack Obama Check One	e: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012	ent For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	181.68	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(b) SOBTOTAL of Officernized independent Experialitates	7 7 7	
(c) TOTAL Independent Expenditures	7 7 7	
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	18 2012	
Signature		

SCHEDULE E)	PAGE 35 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C 000494297	
	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report	filed on Man / Dad / Yayayay	
Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527	Date	
	10 16 2012	
Mailing Address 555 New Jersey Ave. N.W.	Amount	
City State Zip Code	102.30	
Washington DC 20001	Transaction ID : D466344	
Purpose of Expenditure Category/ Category/	Office Sought: House State: WI	
In Kind Staff Type 001	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
TOMMY G THOMPSON	Check One: Support Oppose	
Calendar Year-To-Date Per Election	Disbursement For: Primary General	
for Office Sought 200558.54	Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date	
AFT Solidarity 527	M M / D D / Y Y Y Y	
Mailing Address 555 New Jersey Ave. N.W.	10 16 2012	
Coo New Goldey And Hann	Amount	
City State Zip Code	102.30	
Washington DC 20001	Transaction ID : D466345	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: WI Senate Dietrict: OR	
	President District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	204.60	
(a) CODICIAL OF HOMEON MADERIA EXPONDITURES.	204.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
	7 7 7	
(c) TOTAL Independent Expenditures	>	
	7 7 7	
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	M = M / D = D / Y = Y = Y	
Signature [Electronically Filed] Date	10 18 2012	
Oignaturo		

SCHEDULE E)	PAGE 36 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee		
Transportation Trades Department, AFL-CIO Political Education Fund	M " M	
Mailing Address 815 - 16th Street, NW	10 16 2012	
City State Zip Code		
Washington DC 20006	104.04 saction ID : D466346	
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sou	ught: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	✓ President ✓ Pre	
Willard Mitt Romney Check On	ne: Support X Oppose	
Calendar Year-To-Date Per Election for Office Sought Disbursem	nent For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Transportation Trades Department, AFL-CIO Political Education Fund	M M / D D / Y Y Y Y	
Mailing Address 815 - 16th Street, NW	10 16 2012	
	ount	
City State Zip Code	104.04	
Washington DC 20006	saction ID : D466347	
Purpose of Expenditure In Kind Staff Category/ Type Office Sou		
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
JOSH MANDEL Check On	ne: Support X Oppose	
Calendar Year-To-Date Per Election for Office Sought 348953.86 Disbursem	nent For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	208.08	
(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	18 2012	
Signature		

(SCHEDULE E)	PAGE 37 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends	report filed on M M / D D / Y Y Y Y Y	
Full Name (Last, First, Middle Initial) of Payee		
Transportation Trades Department, AFL-CIO Political Education Fu	nd Date 10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 815 - 16th Street, NW	Amount	
City State Zip Code		
Washington DC 20006	104.04	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: OH Senate District: 06	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
BILL JOHNSON	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Transportation Trades Department, AFL-CIO Political Education	Fund Date Date Date Date Date Date Date Dat	
Mailing Address 815 - 16th Street, NW	Amount	
City State Zip Code		
Washington DC 20006	104.04 Transaction ID : D466349	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: OH Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
Sherrod Brown	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought 348953.86	Disbursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	208.08	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein w with, or at the request or suggestion of, any candidate or authorized committee or age party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed]	Date 10 18 2012	
Signature	10 10 2012	

(SCHEDULE E)	PAGE 38 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report	rt filed on	
Full Name (Last, First, Middle Initial) of Payee		
Transportation Trades Department, AFL-CIO Political Education Fund	Date M M / D D / Y Y Y Y Y Y Y Y Y	
Mailing Address 815 - 16th Street, NW	Amount	
City State Zip Code		
Washington DC 20006	104.04 Transaction ID : D466350	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: OH Senate District: 06	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
Charlie Wilson	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Transportation Trades Department, AFL-CIO Political Education Fundament	Date 10 16 17 18 18 19 19 10 10 10 10 10 10 10 10	
Mailing Address 815 - 16th Street, NW	Amount	
City State Zip Code		
Washington DC 20006	104.04 Transaction ID : D466351	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President — — —	
Barack Obama	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	208.08	
(b) SUBTOTAL of Unitemized Independent Expenditures	>	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were rewith, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 18 2012	
Signature		

SCHEDULE E)	PAGE 39 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	_
UFCW Int'l Union Working Families Advocacy Project	Date M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1775 K Street, NW	Amount
City State Zip Code	110.16
Washington DC 20006-1598	Transaction ID : D466352
	Sought: House State: PA Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: KEITH ROTHFUS Chec	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbut 2012	orsement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project	Date M
Mailing Address 1775 K Street, NW	Amount
City State Zip Code	/ William
Washington DC 20006-1598	110.16
	Transaction ID : D466353 Sought: House State: PA Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Chec	President Compose National President President
Calendar Year-To-Date Per Election for Office Sought 93268.99 Disbu	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	220.32
(b) SUBTOTAL of Unitemized Independent Expenditures	1171171171
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not ma with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10) 18 2012
Signature	

SCHEDULE E)	PAGE 40 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
	C 00404207
Check If 24-hour report 48-hour report New report Amends report filed on	W = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project	
Mailing Address 1775 K Street, NW	10 / 16 / 2012
Amou	ınt
City State Zip Code	110.16
Washington DC 20006-1598 Transa	action ID : D466354
Purpose of Expenditure In Kind Staff Category/ Type Office Soughtime Office Sough	•
Name of Federal Candidate Supported or Opposed by Expenditure:	President — 00
Bob Casey Check One	: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 93268.99 Disburseme	ent For: Primary General wither (specify)
Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project	M M / D D / Y Y Y
Mailing Address 1775 K Street, NW	10 16 2012
Amou	unt
City State Zip Code Washington DC 20006-1598	110.16 action ID : D466355
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sough	
Name of Federal Candidate Supported or Opposed by Expenditure:	President
MARK CRITZ Check One	: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012	ent For: Primary General other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	220.32
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012
Signature	

SCHEDULE E)	PAGE 41 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed of	on Mam / Dad / Yayayay
Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527	Date
Mailing Address 555 New Jersey Ave. N.W.	10 16 2012 Amount
City State Zip Code	
Washington DC 20001	135.18 ransaction ID : D466356
Purpose of Expenditure In Kind Staff Category/ Type Office	Sought: House State: FL Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK Check	President One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbur 256429.75	rsement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527	Date 10 16 2012
Mailing Address 555 New Jersey Ave. N.W.	Amount
City State Zip Code	
Washington DC 20001	135.18 ransaction ID : D466357
Purpose of Expenditure In Kind Staff Category/ Type Office	Sought: House State: FL Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON Check	President One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 256429.75 Disbur 2012	rsement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	270.36
(b) SUBTOTAL of Unitemized Independent Expenditures	1 1 7 1 7 1 7 1
(c) TOTAL Independent Expenditures	1 7 1 7 1 7 1
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

(SCHEDULE E)	PAGE 42 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	rt filed on
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date
Mailing Address 1325 Massachusetts Ave. NW	10
City State Zip Code	
Washington DC 20005	145.83 Transaction ID : D466358
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: NV Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN OCEGUERA	President Check One: Support Oppose
JOHN OCEGOEKA	Chiese Ch
Calendar Year-To-Date Per Election for Office Sought 44315.38	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 10 16 2012
Mailing Address 1325 Massachusetts Ave. NW	Amount
City State Zip Code	
Washington DC 20005	145.83 Transaction ID : D466359
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: NV Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
DEAN HELLER	Check One: Support Oppose
Calendar Year-To-Date Per Election 63710.40	Disbursement For: Primary General Other (specify)
ioi oilioo ooagiik	
(a) SUBTOTAL of Itemized Independent Expenditures	
	291.66
(a) SUBTOTAL of Itemized Independent Expenditures	291.66
(a) SUBTOTAL of Itemized Independent Expenditures	291.66 hot made in cooperation, consultation, or concert
(a) SUBTOTAL of Itemized Independent Expenditures	291.66 hot made in cooperation, consultation, or concert

SCHEDULE E)	PAGE 43 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	t filed on
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date
Mailing Address 1325 Massachusetts Ave. NW	10 16 2012 Amount
City State Zip Code	
Washington DC 20005	145.83 Transaction ID : D466360
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: NV Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: Shelley Berkley	President Check One: Support Oppose
Sitelley betkiey	
Calendar Year-To-Date Per Election 42456.41	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 16 2012
Mailing Address 1325 Massachusetts Ave. NW	Amount
City State Zip Code	
Washington DC 20005	145.83
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: NV Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure:	President
JOE HECK	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 44315.38	Disbursement For: Primary General 2012 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 r with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 18 2012
Signature	

SCHEDULE E)	PAGE 44 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
	0 000404207
Check If 24-hour report	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee	te
Mailing Address 11720 Beltsville Drive #700	10 16 2012
	lount
City State Zip Code Beltsville MD 20705	152.25
Purpose of Expenditure In Kind Staff Category/ Type 001 Office So	Sanata
	President District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK Check On	
Calendar Year-To-Date Per Election for Office Sought Disburser 256429.75	ment For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee	te 10 16 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11720 Beltsville Drive #700	nount
	lount
City State Zip Code Beltsville MD 20705	152.25
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sc	
Name of Federal Candidate Supported or Opposed by Expenditure:	President
BILL NELSON Check O	ne: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburser 256429.75	ment For: ☐ Primary ☐ General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	304.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made i with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	/ D D / Y Y Y Y Y Y Y 18 Y 2012
Signature	

SCHEDULE E)	PAGE 45 OF 101 FOR SE OF FORM 24/48
	EC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Plasterers' Cement Masons' & Shop Hands Political Action Committee	
Mailing Address 11720 Beltsville Drive #700 Amount	
City State Zip Code	
Beltsville MD 20705	194.36 ion ID : D466364
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sought:	
Name of Federal Candidate Supported or Opposed by Expenditure:	President
KEITH ROTHFUS Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursement 2012 Other	For: Primary General er (specify)
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee	
Mailing Address 11720 Beltsville Drive #700	اسنیا لنا ت
Amount	
City State Zip Code Beltsville MD 20705	194.36 tion ID : D466365
Purpose of Expenditure In Kind Staff Category/ Type Office Sought:	
Name of Federal Candidate Supported or Opposed by Expenditure: Check One:	President Support Oppose
TOM SMITH Check One.	Support Oppose
Calendar Year-To-Date Per Election for Office Sought 93268.99 Disbursement 2012 Other	For: Primary General er (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	388.72
(b) SUPTOTAL of Unitamized Independent Expanditures	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in co- with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012
Signature	

SCHEDULE E)	PAGE 46 OF 101 FOR SE OF FORM 24/48
	EC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Plasterers' Cement Masons' & Shop Hands Political Action Committee	M / D D / Y Y Y Y
Mailing Address 11720 Beltsville Drive #700	
Amount	
City State Zip Code	194.36
Beltsville MD 20705	ion ID : D466366
Purpose of Expenditure Category/ Office Sought:	<u> </u>
Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President Oppose
Bob Casey Check One:	Support Oppose
Calendar Year-To-Date Per Election Disbursement 2012 2012	
for Office Sought Othe	er (specify)
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee	
Plasterers Cernent Masons & Shop Hands Political Action Committee	
Mailing Address 11720 Beltsville Drive #700	
Amount	
City State Zip Code Beltsville MD 20705	194.36
Transact Office Sought	ion ID : D466367 House State: PA
Purpose of Expenditure In Kind Staff Category/ Type Office Sought:	Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President
MARK CRITZ Check One:	X Support Oppose
Calendar Year-To-Date Per Election Disbursement	For: Primary X General
105743 40 2012	er (specify)
	<u> </u>
(a) SUBTOTAL of Itemized Independent Expenditures	388.72
	7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7-1-7-1-7-1-7-1-7-1-7-1-7-1-7-1-7-1-7-1
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in code with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012
Signature	

SCHEDULE E)	PAGE 47 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee	M M / D D / Y Y Y Y
Mailing Address 11720 Beltsville Drive #700 Amo	10 16 2012
City State Zip Code Beltsville MD 20705	218.69 action ID : D466368
Purpose of Expenditure In Kind Staff Category/ Type Office Sour	ght: House State: OH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL Check One	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursem 2012	ent For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11720 Beltsville Drive #700 Amo	ount
	218.69 saction ID : D466369
Purpose of Expenditure In Kind Staff Category/ Type Office Sou	ght: House State: OH Senate District: 06 President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON Check One	
Calendar Year-To-Date Per Election for Office Sought Disbursem 2012	ent For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	437.38
(b) SUBTOTAL of Unitemized Independent Expenditures	171171171
(c) TOTAL Independent Expenditures	171171171
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (i party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012
Signature	

SCHEDULE E)	PAGE 48 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	* M / D = D / Y = Y = Y
	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11720 Beltsville Drive #700 Amour	
City State Zip Code	240.00
Beltsville MD 20705	218.69 ction ID : D466370
Purpose of Expenditure In Kind Staff Category/ Type O01 Office Sough	•
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursemer 2012 Otto	nt For: Primary General her (specify)
	10 16 / Y Y Y Y Y Y Y
Amour	nt
City State Zip Code Beltsville MD 20705	218.69 ction ID : D466371
Purpose of Expenditure In Kind Staff Category/ Type O01 Office Sough	
Name of Federal Candidate Supported or Opposed by Expenditure: Charlie Wilson Check One:	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursemer 2012 Ot	nt For: Primary General
(a) SUBTOTAL of Itemized Independent Expenditures	437.38
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in c with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012
Signature	

SCHEDULE E)	PAGE 49 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFT Solidarity 527	Date
Mailing Address 555 New Jersey Ave. N.W.	10 16 2012 Amount
City.	Amount
City State Zip Code Washington DC 20001	219.19
Purpose of Expenditure Category/ Offic	Transaction ID : D466372 e Sought: House State: OH
Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL Check	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought 348953.86	ursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527	Date
	10 / 16 / Y Y Y Y Y Y
Mailing Address 555 New Jersey Ave. N.W.	Amount
City State Zip Code	
Washington DC 20001	219.19
	Transaction ID : D466373 e Sought: House State: OH
In Kind Staff Type 001	Senate District: 06 President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON Check	ck One: Support X Oppose
BILL JOI INGON	
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	438.38
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Data 1	M / D D / Y Y Y Y Y
Signature [Electronically Filea] Date	0 18 2012

SCHEDULE E)	PAGE 50 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	DIDENTIFICATION NUMBER ▼
Workers' Voice	
Check If 24-hour report X 48-hour report New report Amends report filed on	/ D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFT Solidarity 527	/ D D / Y Y Y Y
Mailing Address 555 New Jersey Ave. N.W. Amount	16 2012
City State Zip Code Washington DC 20001	219.19
Transaction	n ID : D466374
Purpose of Expenditure In Kind Staff Category/ Type O01	House State: OH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Sherrod Brown Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursement Fo	or: Primary General (specify)
Full Name (Last, First, Middle Initial) of Payee Date	
AFT Solidarity 527	/ D D / Y Y Y Y
Mailing Address 555 New Jersey Ave. N.W.	16 2012
Amount	
City State Zip Code	219.19
	n ID : D466375
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sought:	House State: OH Senate District: 06
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Charlie Wilson Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursement Fo	or: Primary General (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	438.38
	7 1 1 7 1 1 7 1
(b) SUBTOTAL of Unitemized Independent Expenditures	7
(c) TOTAL Independent Expenditures	7.1.7.1.7.1
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coope with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reparty committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	D / Y = Y = Y
[Electronically Filed] Date 10 18	8 2012

SCHEDULE E)	PAGE 51 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	ort filed on
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	M M / D D / Y Y Y
Mailing Address 1325 Massachusetts Ave. NW	10 16 2012 Amount
City State Zip Code	
Washington DC 20005	235.40 Transaction ID : D466377
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	Y President
Willard Mitt Romney	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	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 10 16 2012
Mailing Address 1325 Massachusetts Ave. NW	Amount
City State Zip Code	235.40
Washington DC 20005	Transaction ID : D466378
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President —
Barack Obama	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	470.80
(b) SUBTOTAL of Unitemized Independent Expenditures	·
(c) TOTAL Independent Expenditures	•
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 18 2012
Signature	

(SCHEDULE E)	PAGE 52 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	rt filed on
Full Name (Last, First, Middle Initial) of Payee	
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	Date M M / D D / Y Y Y Y Y Y Y Y Y
Mailing Address 100 Indiana Avenue, N.W.	Amount
City State Zip Code	
Washington DC 20001	259.04
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: PA Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
KEITH ROTHFUS	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATIO Mailing Address 100 Indiana Avenue, N.W.	N Date 10 16 7 2012
Too Indiana Avenue, N.W.	Amount
City State Zip Code	
Washington DC 20001	259.04
Purpose of Expenditure In Kind Staff Category/ 001	Office Sought: House State: PA
Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
TOM SMITH	Check One: Support Oppose
Calendar Year-To-Date Per Election 93268.99	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	518.08
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7
(c) TOTAL Independent Expenditures	>
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 18 2012

(SCHEDULE E)	PAGE 53 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report fil	ed on M M / D D / Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	Date
Mailing Address 100 Indiana Avenue, N.W.	10 / 16 / Y Y Y Y Y
	Amount
City State Zip Code Washington DC 20001	259.04 Transaction ID : D466381
Purpose of Expenditure In Kind Staff Category/ Type 001	ffice Sought: House State: PA Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Bob Casey CI	heck One: Support Oppose
Calendar Year-To-Date Per Election 93268.99 Di 201	Sbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	Date 10 16 7 2012
Mailing Address 100 Indiana Avenue, N.W.	Amount
City State Zip Code	259.04
Washington DC 20001	Transaction ID : D466382
Purpose of Expenditure In Kind Staff Category/ Type 001	ffice Sought: House State: PA Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President
MARK CRITZ CI	heck One: Support Oppose
Calendar Year-To-Date Per Election 105743.40 Di 201	isbursement For: Primary General 12 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	518.08
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eit 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 = Y = Y = Y = Y
Signature	

SCHEDULE E)	PAGE 54 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Ohio AFL-CIO Voter Education Fund	Date M M / D D / Y Y Y Y Y Y Y Y Y
Mailing Address 395 E. Broad Street	Amount
City State Zip Code	
Columbus OH 43215	260.34 ransaction ID : D466383
Purpose of Expenditure In Kind Staff Category/ Type 001	Sought: House State: Senate District: 00
Name of Fodoral Condidate Cunnerted or Opposed by Fynanditure.	President District: 00
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 Disbur 2012	rsement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Ohio AFL-CIO Voter Education Fund	Date
Mailing Address 395 E. Broad Street	10 16 2012
	Amount
City State Zip Code Columbus OH 43215	260.34
Office	Transaction ID: D466384 Sought: House State: OH
In Kind Staff Category/ Type O01	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL Check	President One: Support Oppose
	rsement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	520.68
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

(SCHEDULE E)	PAGE 55 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	filed on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Ohio AFL-CIO Voter Education Fund	Date 10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 395 E. Broad Street	Amount
City State Zip Code	200.04
Columbus OH 43215	260.34 Transaction ID : D466385
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: OH Senate District: 06
Name of Federal Candidate Supported or Opposed by Expenditure:	President
BILL JOHNSON	Check One: Support Oppose
L Calendal fear-10-Date Fel Election	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Ohio AFL-CIO Voter Education Fund	Date 10 16 2012
Mailing Address 395 E. Broad Street	Amount
City State Zip Code	Amount
City State Zip Code Columbus OH 43215	260.34 Transaction ID : D466386
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: OH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Sherrod Brown	Check One: Support Oppose
Calcilual Teal-TO-Date Fel Election	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	520.68
(b) SUBTOTAL of Unitemized Independent Expenditures	·
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 18 2012
Signature	.0 .0 .2012

SCHEDULE E)	PAGE 56 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report 48-hour report New report Amends report filed on	M
Full Name (Last, First, Middle Initial) of Payee	
	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 395 E. Broad Street Amount	nt
City State Zip Code	260.34
Columbus OH 43215	ction ID : D466387
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sough	
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Charlie Wilson Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursemer 2012 Ot	nt For: Primary General ther (specify)
Full Name (Last, First, Middle Initial) of Payee Ohio AFL-CIO Voter Education Fund	
Mailing Address 395 E. Broad Street	10 16 2012
Amou	nt
City State Zip Code	260.34
Columbus OH 43215 Transa	action ID : D466388
Purpose of Expenditure In Kind Staff Category/ Type Office Sough	ht: House State: Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President ——
Barack Obama Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursement 2012 Otto	nt For: Primary General ther (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	520.68
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012
Signature	

(SCHEDULE E)	PAGE 57 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report 48-hour report New report Amends repo	ort filed on
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	Date
Mailing Address 100 Indiana Avenue, N.W.	10 16 / Y Y Y Y Y
100 Ilidiala Avende, N.W.	Amount
City State Zip Code	260.81
Washington DC 20001	Transaction ID : D466389
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: OH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
JOSH MANDEL	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATIO	N 10 16 / Y 2012
Mailing Address 100 Indiana Avenue, N.W.	Amount
City State Zip Code	Amount
Washington DC 20001	260.81
Purpose of Expenditure In Kind Staff Category/ 001	Office Sought: House State: OH
lype	Senate District: 06 President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	521.62
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	. •
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent o party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date	M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature Date	10 18 2012

SCHEDULE E)	PAGE 58 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION Mailing Address 100 Indiana Avenue, N.W.	10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
An	nount
City State Zip Code Washington DC 20001	260.81
Purpose of Expenditure In Kind Staff Category/ Type Office So	_
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown Check O	
Calendar Year-To-Date Per Election for Office Sought Disburse 2012	ment For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION Mailing Address 100 Indiana Avenue, N.W.	M 10 / 16 / Y 2012
	nount
	260.81 nsaction ID : D466392
Purpose of Expenditure In Kind Staff Category/ Type Office So	Senate District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: Charlie Wilson Check C	President One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburse 2012	ment For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	521.62
(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 with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date Signature	18 2012

SCHEDULE E)	PAGE 59 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
	G 600404207
Check If 24-hour report 48-hour report New report Amends report fi	iled on M / D D / Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account	Date
	10 16 Y Y Y Y Y Y Y Y
Mailing Address 1300 L Street, NW	Amount
City State Zip Code	201.10
Washington DC 20005	291.19 Transaction ID : D466393
	Office Sought: House State: NV
In Kind Staff Type 001 001	Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
JOHN OCEGUERA C	Check One: Support Oppose
Caleliual Teal-10-Date Fel Election	Disbursement For: Primary General
for Office Sought 44315.38 20	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
APWU Separate Segregated Super PAC Account	M M / D D / Y Y Y Y
Mailing Address 4000 L O ANN	10 16 2012
Mailing Address 1300 L Street, NW	Amount
City State Zip Code	
Washington DC 20005	291.19
Purpose of Expenditure Category/ Category/ Code	Transaction ID : D466394 Office Sought: House State: NV
In Kind Staff Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
	Check One: Support Oppose
Outside Visit To Data Bus Floring	Disbursement For: Primary 😿 General
	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	582.38
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eiparty committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	M = M / D = D / Y = Y = Y
[Electronically Filed] Date	10 18 2012
Signature	

(SCHEDULE E)	PAGE 60 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report file	d on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	_
APWU Separate Segregated Super PAC Account	Date 10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1300 L Street, NW	Amount
City State Zip Code	
Washington DC 20005	291.19
Purpose of Expenditure In Kind Staff Category/ Type Off	ce Sought: House State: NV Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	bursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
APWU Separate Segregated Super PAC Account	10 16 2012
Mailing Address 1300 L Street, NW	
	Amount
City State Zip Code Washington DC 20005	291.19 Transaction ID : D466396
In Kind Stoff	ice Sought: House State: NV
In Kind Staff Type 001	Senate District: 03 President
Name of Federal Candidate Supported or Opposed by Expenditure:	
JOE HECK Cn	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Dis	bursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	582.38
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not new th, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Data	10 18 2012
Signature Date	10 18 2012

(SCHEDULE E)	PAGE 61 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	ort filed on
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	Date 10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 100 Indiana Avenue, N.W.	Amount
City State Zip Code Washington DC 20001	316.38 Transaction ID : D466397
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: NV Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN OCEGUERA	Check One: President Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATIO	Date 10 / 16 / 2012
Mailing Address 100 Indiana Avenue, N.W.	Amount
CityStateZip CodeWashingtonDC20001	316.38 Transaction ID : D466398
Purpose of Expenditure In Kind Staff Category/ Type O01	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	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	632.76
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date Signature	10 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

(SCHEDULE E)	PAGE 62 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	t filed on
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	Date
Mailing Address 100 Indiana Avenue, N.W.	10
	Amount
City State Zip Code Washington DC 20001	316.38 Transaction ID : D466399
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: NV Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Shelley Berkley	Check One: Support Oppose
Calendar Year-To-Date Per Election 42456.41	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION Mailing Address 100 Indiana Avenue, N.W.	N Date 16 2012
	Amount
City State Zip Code Washington DC 20001	316.38
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: NV Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: JOE HECK	President Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 44315.38	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	632.76
(b) SUBTOTAL of Unitemized Independent Expenditures	·
(c) TOTAL Independent Expenditures	·
Under penalty of perjury I certify that the independent expenditures reported herein were rewith, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date Signature	10 / 18 / 2012
	'

SCHEDULE E)	PAGE 63 OF 101 FOR SE OF FORM 24/48
	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11720 Beltsville Drive #700 Amount	
City State Zip Code	
Beltsville MD 20705	321.82 tion ID : D466401
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sought	_
Name of Federal Candidate Supported or Opposed by Expenditure:	President
TOMMY G THOMPSON Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought 200558.54 Disbursement 2012 Other	er (specify)
	M / D D / Y Y Y
Mailing Address 11720 Beltsville Drive #700 Amount	0 16 2012
City State Zip Code	
Beltsville MD 20705	321.82
Purpose of Expenditure In Kind Staff Category/ Type Office Sought	tion ID : D466402 House State: WI Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President — 00
TAMMY BALDWIN Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursement 2012 Other	For: Primary General er (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	643.64
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(b) 19112 masperiasit Experiataree	7 1 7 1 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in co with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012
Signature	

SCHEDULE E)	PAGE 64 OF 101 FOR SE OF FORM 24/48
	EC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Plasterers' Cement Masons' & Shop Hands Political Action Committee	
Mailing Address 11720 Beltsville Drive #700 Amount	
City State Zip Code	
Beltsville MD 20705	344.64 ion ID : D466403
Purpose of Expenditure In Kind Staff Category/ Type Office Sought:	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
JOHN OCEGUERA Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursement 2012 Other	For: Primary General er (specify)
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee	
Mailing Address 11720 Beltsville Drive #700 Amount	
City State Zip Code	
Beltsville MD 20705	344.64
Purpose of Expenditure In Kind Staff Category/ Type 001	Senate Service
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 00
DEAN HELLER Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursement 2012 Other	For: Primary General er (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	689.28
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in country, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012
Signature	

SCHEDULE E)	PAGE 65 OF 101 FOR SE OF FORM 24/48
	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M / D D / Y D Y D Y
	M / D D / Y Y Y Y
Mailing Address 11720 Beltsville Drive #700 Amoun	10 16 2012
City State Zip Code	
Beltsville MD 20705	344.64 etion ID : D466405
Purpose of Expenditure In Kind Staff Category/ Type O01 Office Sough	t: House State: NV Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: Shelley Berkley Check One:	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursemen 2012 Oth	t For: Primary General ner (specify)
	10 16 Y 2012 Y
Amoun	t
City State Zip Code Beltsville MD 20705	344.64 ction ID : D466406
Purpose of Expenditure In Kind Staff Category/ Type Office Sough	Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: JOE HECK Check One:	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursemen 2012 Oth	ner (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	689.28
(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 cowith, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012
Signature	

SCHEDULE E)	PAGE 66 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Wisconsin State AFL-CIO	Date
Mailing Address 6333 W. Blue Mound Road	10 16 2012 Amount
City State Zip Code	Amount
Milwaukee WI 53213	365.47
	Sought: House State: Senate District: 00
	President District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney Check	
Calendar Year-To-Date Per Election for Office Sought Disbur 2012	rsement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Wisconsin State AFL-CIO	Date
	10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 6333 W. Blue Mound Road	Amount
City State Zip Code	205.42
Milwaukee WI 53213	365.47
Purpose of Expenditure Category/ Office	Transaction ID : D466408 Sought: House State: WI
Type 001	Senate District: 00 President
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON Check	
Calendar Year-To-Date Per Election for Office Sought 200558.54 Disbur 2012	rsement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	730.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	10 2012

SCHEDULE E)	PAGE 67 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Wisconsin State AFL-CIO	Date
Mailing Address 6333 W. Blue Mound Road	10 16 2012 Amount
City State Zip Code	
Milwaukee WI 53213	365.47
Purpose of Expenditure In Kind Staff Category/ Type 001	Sought: House State: WI Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 200558.54 Disbut	rsement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Wisconsin State AFL-CIO	Date
Mailing Address 6333 W. Blue Mound Road	10 16 2012
	Amount
City State Zip Code Milwaukee WI 53213	365.47 Transaction ID : D466410
	Sought: House State: Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President — 00
	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbu	orsement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	730.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mawith, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

SCHEDULE E)	PAGE 68 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
APWU Separate Segregated Super PAC Account	Date M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1300 L Street, NW	Amount
City State Zip Code	370.83
Washington DC 20005	Transaction ID : D466411
	Sought: House State: FL Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK Chec	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbut 256429.75	orsement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account	Date 10 16 2012
Mailing Address 1300 L Street, NW	Amount
City State Zip Code	270.02
Washington DC 20005	370.83
	Transaction ID : D466412 Sought: House State: FL Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
BILL NELSON Chec	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbu 256429.75	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	741.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not ma with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10) 18 2012
Signature	

NAME OF COMMITTE (In Full)		
\A/11 \/ / . ¹		FEC IDENTIFICATION NUMBER ▼
Workers' Voice		C C00484287
Check If 24-hour report X 48-hour report New I	report Amends repo	rt filed on
Full Name (Last, First, Middle Initial) of Payee		Data
APWU Separate Segregated Super PAC Ac	count	Date 10 16 7 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
Mailing Address 1300 L Street, NW		Amount
City State	Zip Code	478.86
Washington DC	20005	Transaction ID : D466413
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: House State: OH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expendit	ure:	President
JOSH MANDEL		Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	348953.86	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Acce	ount	Date 10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1300 L Street, NW		10 10 2012
		Amount
City State Washington DC	Zip Code 20005	478.86
Purpose of Expenditure	Category/	Transaction ID : D466414 Office Sought:
In Kind Staff	Type 001	Senate District: 06
Name of Federal Candidate Supported or Opposed by Expendit	ure:	Check One: Support Oppose
BILL JOHNSON		
Calendar Year-To-Date Per Election for Office Sought	144970.16	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		. 957.72
(b) SUBTOTAL of Unitemized Independent Expenditures		•
(c) TOTAL Independent Expenditures		>
Under penalty of perjury I certify that the independent expendituwith, or at the request or suggestion of, any candidate or authority party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electr	ronically Filed] Date	10 18 2012
Signature	Date	

SCHEDULE E)	PAGE 70 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	t filed on Man / Dab / Yayayay
Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account	Date
Mailing Address 1300 L Street, NW	10 16 2012 Amount
City State Zip Code	
Washington DC 20005	478.86
Purpose of Expenditure In Kind Staff Category/ Type 001	Transaction ID : D466415 Office Sought: House State: OH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Sherrod Brown	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee APWU Separate Segregated Super PAC Account	Date 10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1300 L Street, NW	Amount
City State Zip Code	170.00
Washington DC 20005	478.86 Transaction ID : D466416
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: OH Senate District: 06
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Charlie Wilson	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	957.72
(b) SUBTOTAL of Unitemized Independent Expenditures	•
(c) TOTAL Independent Expenditures	•
Under penalty of perjury I certify that the independent expenditures reported herein were rewith, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	•
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 18 2012
Signature	

(SCHEDULE E)	PAGE 71 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report	filed on M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee		
AFT Solidarity 527	Date	
Mailing Address 555 New Jersey Ave. N.W.	10	
City.	Amount	
City State Zip Code Washington DC 20001	490.00	
	Transaction ID : D466417 Office Sought: House State:	
In Kind Staff Type 001	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
Willard Mitt Romney	Check One: Support Oppose	
Calcillat real-10-Date Fet Election	Disbursement For: Primary General O12 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date	
AFT Solidarity 527	10 16 2012	
Mailing Address 555 New Jersey Ave. N.W.	10 16 2012	
	Amount	
City State Zip Code Washington DC 20001	490.00	
Description of Employees	Transaction ID : D466418 Office Sought: House State:	
In Kind Staff Category/ Type O01	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
Barack Obama	Check One: Support Oppose	
Calcillat real-10-bate fet election	Disbursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	980.00	
(b) SUBTOTAL of Unitemized Independent Expenditures	>	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler	M = M / D = D / Y = Y = Y	
[Electronically Filed] Date Signature	10 18 2012	

(SCHEDULE E)	PAGE 72 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report	ort filed on
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	Date
Mailing Address	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 100 Indiana Avenue, N.W.	Amount
City State Zip Code	604.09
Washington DC 20001	Transaction ID : D466419
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: FL Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President - 30
CONNIE MACK	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATIO	10 16 7 2012
Mailing Address 100 Indiana Avenue, N.W.	Amount
City State Zip Code	
Washington DC 20001	604.09 Transaction ID : D466420
Purpose of Expenditure Category/ Type 001	Office Sought: House State: FL
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 00
BILL NELSON	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 1208.18
(b) SUBTOTAL of Unitemized Independent Expenditures	-
(a) TOTAL Independent Europelitures	
(c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent c party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date	M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature [Electronically Filea] Date	9 10 18 2012

(SCHEDULE E)	PAGE 73 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report 48-hour report New report Amends report	ort filed on	
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	Date	
Mailing Address 100 Indiana Avenue, N.W.	10 16 2012	
	Amount	
City State Zip Code Washington DC 20001	674.39	
	Transaction ID : D466421	
Purpose of Expenditure In Kind Staff Category/ Type O01	Office Sought: House State: WI Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
TOMMY G THOMPSON	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date	
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 100 Indiana Avenue, N.W.	10 10 2012	
	Amount	
City State Zip Code Washington DC 20001	674.39	
Divines of Funeralities	Transaction ID : D466422 Office Sought: House State: WI	
In Kind Staff Category/ Type 001	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
TAMMY BALDWIN	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 1348.78	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed] Date	M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature	2012	

SCHEDULE E)	PAGE 74 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFSCME Special Account	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1625 L Street, NW Amou	
City State Zip Code	
Washington DC 20036	758.09 action ID : D466423
Purpose of Expenditure In Kind Staff Category/ Type 001	<u> </u>
Name of Federal Candidate Supported or Opposed by Expenditure:	President
JOHN OCEGUERA Check One	e: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012	ent For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account	M M / D D / Y Y Y
Mailing Address 1625 L Street, NW	10 16 2012
Amou	unt
City State Zip Code	758.09
Washington DC 20036 Trans	action ID : D466424
Purpose of Expenditure In Kind Staff Category/ Type 001	ght: House State: NV Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
DEAN HELLER Check One	e: Support Dppose
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012	ent For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1516.18
(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 with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012
Signature	

SCHEDULE E)	PAGE 75 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	DENTIFICATION NUMBER ▼
Workers' Voice	C00484287
Check If 24-hour report	/ D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFSCME Special Account	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1625 L Street, NW Amount	10 2012
City State Zip Code	
Washington DC 20036	758.09 ND: D466425
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sought:	House State: NV Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Shelley Berkley Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursement Fo	or: Primary General (specify)
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account	/ D.D / Y.Y.Y.Y
Mailing Address 1625 L Street, NW	16 2012
Amount	
City State Zip Code Washington DC 20036	758.09
Transaction Office Sought	n ID : D466426 House State: NV
In Kind Staff Category/ Type Onice Sought.	Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Check One:	President Oppose
JOE HECK Check One:	Support Depose
Calendar Year-To-Date Per Election for Office Sought Disbursement Fo	or: Primary General (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1516.18
(a) SOBTOTAL OF REMIZED INDEPENDENT EXPENDITURES	1310.10
(b) SUBTOTAL of Unitemized Independent Expenditures	7
(c) TOTAL Independent Expenditures	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coope with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reparty committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10 18	8 2012
Signature	المتنتا ال

SCHEDULE E)	PAGE 76 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed or	1 M M M / D D / Y M Y M Y
Full Name (Last, First, Middle Initial) of Payee SEIU Local 32BJ NY/NJ American Dream Fund	Date 10 16 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Mailing Address 25 W 18th St	Amount
City State Zip Code New York NY 10011-4677	985.82 ansaction ID : D466427
Purpose of Expenditure In Kind Staff Category/ Type Office S	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney Check	
Calendar Year-To-Date Per Election for Office Sought Disburs 2012	sement For: Primary General Other (specify)
SEIU Local 32BJ NY/NJ American Dream Fund	Date 10 / 16 / 2012
Mailing Address 25 W 18th St	Amount
City State Zip Code New York NY 10011-4677	985.82 ansaction ID : D466428
Purpose of Expenditure In Kind Staff Category/ Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON Check	One: President Oppose
Calendar Year-To-Date Per Election for Office Sought 200558.54 Disburs 2012	sement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1971.64
(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 with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date To be a signature To be a sig	/ 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE E)	PAGE 77 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report 48-hour report New report Amends report	ort filed on
Full Name (Last, First, Middle Initial) of Payee SEIU Local 32BJ NY/NJ American Dream Fund	Date
Mailing Address 25 W 18th St	10
City State Zip Code New York NY 10011-4677	985.82
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: WI Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN	Check One: President Oppose
Calendar Year-To-Date Per Election 200558.54	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee SEIU Local 32BJ NY/NJ American Dream Fund	Date 10 16 2012
Mailing Address 25 W 18th St	Amount
City State Zip Code New York NY 10011-4677	985.82 Transaction ID : D466430
Purpose of Expenditure In Kind Staff Category/ Type O01	Office Sought: House State: Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 1971.64
(b) SUBTOTAL of Unitemized Independent Expenditures	. •
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date Signature	e 10 / 18 / 2012

SCHEDULE E)	PAGE 78 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	n M = M / D = D / Y = Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFSCME Special Account	Date M M / D D / Y Y Y Y Y Y Y Y Y
Mailing Address 1625 L Street, NW	Amount
City State Zip Code	
Washington DC 20036	1383.94 ransaction ID : D466431
	Sought: House State: PA Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President 72
KEITH ROTHFUS Check	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 105743.40 Disburs	sement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account	Date
Mailing Address 1625 L Street, NW	10 16 2012
	Amount
City State Zip Code	1383.94
	ransaction ID : D466432
Purpose of Expenditure In Kind Staff Category/ Type Office	Sought: House State: PA Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
TOM SMITH Check	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 93268.99 Disburs 2012	sement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2767.88
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not madwith, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012
Signature	

SCHEDULE E)	PAGE 79 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed	on
Full Name (Last, First, Middle Initial) of Payee	
AFSCME Special Account	Date M M / D D / Y Y Y Y Y Y Y Y Y
Mailing Address 1625 L Street, NW	Amount
City State Zip Code	
Washington DC 20036	1383.94 Transaction ID : D466433
Purpose of Expenditure In Kind Staff Category/ Type 001	te Sought: House State: PA Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
	ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 93268.99	oursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account	Date
Mailing Address 1625 L Street, NW	10 16 2012
	Amount
City State Zip Code Washington DC 20036	1383.94
Purpose of Expenditure Category/ Office	te Sought: House State: PA
In Kind Staff Out Staff Out Staff	Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ Che	ck One: Support Oppose
WARR GRITZ	
Calendar Year-To-Date Per Election for Office Sought	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2767.88
(a) SOBTOTAL OF REMIZED INDEPENDENT EXPENDITURES.	2101.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date	0 18 2012
Signature	

(SCHEDULE E)	PAGE 80 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice C C00484287		
Check If 24-hour report X 48-hour report New report Amends report	t filed on	
Full Name (Last, First, Middle Initial) of Payee		
Plasterers' Cement Masons' & Shop Hands Political Action Committee	Date M M / D D / Y Y Y Y Y Y Y Y Y	
Mailing Address 11720 Beltsville Drive #700	Amount	
City State Zip Code	4547.47	
Beltsville MD 20705	1517.47 Transaction ID : D466435	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
Willard Mitt Romney	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee Mailing Address 11720 Beltsville Drive #700		
	Amount	
City State Zip Code Beltsville MD 20705	1517.47 Transaction ID : D466436	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
Barack Obama	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures		
(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 18 2012	
Signature		

SCHEDULE E)	PAGE 81 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee		
UFCW Int'l Union Working Families Advocacy Project	10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1775 K Street, NW Amo	ount	
City State Zip Code	1859.32	
Washington DC 20006-1598	saction ID : D466437	
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sou		
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
TOMMY G THOMPSON Check On		
Calendar Year-To-Date Per Election for Office Sought Disbursem 200558.54	nent For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project	M M / D D / Y Y Y Y	
Mailing Address 1775 K Street, NW	10 16 2012	
Amo	ount	
City State Zip Code Washington DC 20006-1598	1859.32 saction ID : D466438	
Purpose of Expenditure In Kind Staff Category/ Type 001		
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
TAMMY BALDWIN Check On	e: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought 200558.54 Disbursem	nent For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	3718.64	
(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	18 2012	
Signature		

SCHEDULE E)	PAGE 82 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report	filed on M M / D D / Y Y Y Y Y	
Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project	Date	
Mailing Address 1775 K Street, NW	10 16 2012	
	Amount	
City State Zip Code Washington DC 20006-1598	1869.05	
Duvenee of Evenediture	Transaction ID : D466439 Office Sought: House State: OH	
In Kind Staff Category/ Type 001	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
JOSH MANDEL	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project	Date	
Mailing Address 1775 K Street, NW	10	
City State Zip Code		
Washington DC 20006-1598	1869.05 Transaction ID : D466440	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: OH Senate District: 06	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
BILL JOHNSON	Check One: Support Oppose	
Calendar Year-To-Date Per Election 144970.16	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	3738.10	
(b) SUBTOTAL of Unitemized Independent Expenditures	•	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were n with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	·	
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 18 2012	
Signature	10 2012	

(SCHEDULE E)	PAGE 83 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report	filed on M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project	Date	
Mailing Address 1775 K Street, NW	10 16 2012 Amount	
City State Zip Code		
Washington DC 20006-1598	1869.05	
	Transaction ID : D466441	
Purpose of Expenditure In Kind Staff Category/ Type Out Out Out Out Type Out Out Out Out Out Out Out Ou	Office Sought: House State: OH Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
Glicifica Blown	Check One: Support Oppose	
	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee UFCW Int'l Union Working Families Advocacy Project	Date 10 16 2012	
Mailing Address 1775 K Street, NW	Amount	
City State Zip Code		
Washington DC 20006-1598	1869.05 Transaction ID : D466442	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: OH Senate District: 06	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
Charlie Wilson	Check One: Support Oppose	
	Disbursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	3738.10	
(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	
Signature		

SCHEDULE E)	PAGE 84 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report	Amends report filed on M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee	Dete	
APWU Separate Segregated Super PAC Account	Date 10 16 2012	
Mailing Address 1300 L Street, NW	Amount	
City State Zip Code	2100.52	
Washington DC 20005	Transaction ID : D466443	
Purpose of Expenditure In Kind Staff Category/ Type	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	∑ President	
Willard Mitt Romney	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date	
APWU Separate Segregated Super PAC Account	10 16 2012	
Mailing Address 1300 L Street, NW	Amazint	
01 70	Amount	
City State Zip Code Washington DC 20005	2100.52 Transaction ID : D466444	
Purpose of Expenditure Category/ In Kind Staff	Office Sought: House State:	
Type	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama	Check One: Support Oppose	
Calendar Year-To-Date Per Election	Disbursement For: Primary X General	
for Office Sought	2012 Other (specify)	
(a) CUDTOTAL of Itamized Independent Eveneditures	4204.04	
(a) SUBTOTAL of Itemized Independent Expenditures	4201.04	
(b) SUBTOTAL of Unitemized Independent Expenditures	>	
(c) TOTAL Independent Expenditures		
	7 7 7	
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized committe party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed	Date 10 18 2012	
Signature	Date 10 2012	

(SCHEDULE E)	PAGE 85 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	ort filed on
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION Mailing Address 100 Indiana Avenue N.W.	Date 10 / 16 / 2012
100 Indiana Avenue, N.W.	Amount
City State Zip Code Washington DC 20001	2374.26 Transaction ID : D466446
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00
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	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION Mailing Address 100 Indiana Avenue, N.W.	10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code	Amount
Washington DC 20001	2374.26 Transaction ID : D466447
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	• 4748.52
(b) SUBTOTAL of Unitemized Independent Expenditures	. •
(c) TOTAL Independent Expenditures	· •
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date Signature	9 10 18 2012

SCHEDULE E)	PAGE 86 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFSCME Special Account	Date M M / D D / Y Y Y Y Y Y Y Y Y
Mailing Address 1625 L Street, NW	Amount
City State Zip Code	
Washington DC 20036	3209.57 Transaction ID : D466448
Purpose of Expenditure In Kind Staff Category/ Type 001	e Sought: House State: OH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
JOSH MANDEL Chec	ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbut 2012	ursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account	Date
Mailing Address 1625 L Street, NW	10 16 2012
	Amount
City State Zip Code Washington DC 20036	3209.57
Purpose of Expenditure Category/ Office	Transaction ID : D466449 e Sought:
In Kind Staff O01	Senate District: 06
Name of Federal Candidate Supported or Opposed by Expenditure:	President Support Oppose
BILL JOI INGOIN	
Calendar Year-To-Date Per Election for Office Sought 144970.16 Disbi	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	6419.14
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	0 18 2012
Signature	

SCHEDULE E)	PAGE 87 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report 48-hour report New report Amends report filed	on
Full Name (Last, First, Middle Initial) of Payee	
AFSCME Special Account	Date
Mailing Address 1625 L Street, NW	10 16 2012 Amount
City State Zip Code	
Washington DC 20036	3209.57 Transaction ID : D466450
Purpose of Expenditure In Kind Staff Category/ Type 001	House State: OH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
	ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disb. 2012	oursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account	Date
Mailing Address 1625 L Street, NW	10 16 2012
	Amount
City State Zip Code Washington DC 20036	3209.57
Purpose of Expenditure In Kind Staff Category/ Type 001	the Sought: Senate Dictrict: OH Senate Dictrict: OH
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 06
	ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disk 2012	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	6419.14
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 1	0 18 2012
Signature	

(SCHEDULE E)	PAGE 88 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	rt filed on
Full Name (Last, First, Middle Initial) of Payee	
AFSCME Special Account	Date
Mailing Address 1625 L Street, NW	10
City State Zip Code	Autourk
Washington DC 20036	3882.55 Transaction ID : D466452
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: FL Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
CONNIE MACK	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account	Date 10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1625 L Street, NW	Amount
Oh. Oh. Zin Onda	Amount
CityStateZip CodeWashingtonDC20036	3882.55 Transaction ID : D466453
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: FL Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
BILL NELSON	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	7705.40
(a) SOBTOTAL OF REITIZED THOUSEHOLD EXPERIDITURES	7765.10
(b) SUBTOTAL of Unitemized Independent Expenditures	>
(c) TOTAL Independent Expenditures	>
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 18 2012
Signature	.5 .0 .2012

(SCHEDULE E)	PAGE 89 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	filed on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
UFCW Int'l Union Working Families Advocacy Project	Date 10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1775 K Street, NW	Amount
City State Zip Code	Allount
Washington DC 20006-1598	3883.89
	Transaction ID : D466454
Purpose of Expenditure In Kind Staff Category/ Type Out Out Out Out Out Out Out Ou	Office Sought: House State: Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Willard Mitt Romney	Check One: Support Oppose
	Disbursement For: Primary General O12 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
UFCW Int'l Union Working Families Advocacy Project	M - M / D D / Y - Y - Y
Mailing Address 1775 K Street, NW	10 16 2012
	Amount
City State Zip Code Washington DC 20006-1598	6246.10
Purpose of Expenditure Category/	Transaction ID : D466455 Office Sought: House State:
In Kind Staff O01	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Barack Obama	Check One: Support Oppose
	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	10129.99
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	M = M / D = D / Y = Y = Y
[Electronically Filed] Date Signature	10 18 2012
-	

SCHEDULE E)	PAGE 90 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFSCME Special Account	Date M M / D D / Y Y Y Y Y Y Y Y Y
Mailing Address 1625 L Street, NW	Amount
City State Zip Code	
Washington DC 20036	9357.94 ransaction ID : D466456
Purpose of Expenditure In Kind Staff Category/ Ont	Sought: House State:
Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney Check	President One: Support X Oppose
Diebu	rsement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 1110412.30	Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account	Date
·	10 16 / Y Y Y Y Y
Mailing Address 1625 L Street, NW	Amount
City State Zip Code	0500.04
Washington DC 20036	9586.91 Fransaction ID : D466457
Purpose of Expenditure Category/ Office	Sought: House State:
In Kind Staff 001 Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama Check	COne: Support Oppose
Diehu	rsement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	18944.85
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(c) TOTAL independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Data 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature [Electronically Filea] Date 10	10 2012

(SCHEDULE E)	PAGE 91 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	t filed on
Full Name (Last, First, Middle Initial) of Payee	
AFL-CIO	Date
	10 16 2012
Mailing Address 815 - 16th Street, NW	Amount
City State Zip Code	7 tillouit
Washington DC 20006	29.62
	Transaction ID : D466465
Purpose of Expenditure Walk Packets Category/ Type 004	Office Sought: House State: NV Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure:	President
JOHN OCEGUERA	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
AFL-CIO	M M / D D / Y Y Y Y
Mailing Address 815 - 16th Street, NW	10 16 2012
Walling Address 815 - Tolli Street, NVV	Amount
City State Zip Code	
Washington DC 20006	29.62
	Transaction ID : D466466 Office Sought:
Purpose of Expenditure Category/ Walk Packets Category/ Type 004	Sanata
	President District: 03
Name of Federal Candidate Supported or Opposed by Expenditure:	
JOE HECK	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought 44315.38	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	59.24
(b) SUBTOTAL of Unitemized Independent Expenditures	
(b) SOBTOTAL OF OTHER INDEPENDENT EXPENDITURES	•
(a) TOTAL Independent Expanditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were n	
with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	either, or (if the reporting entity is not a political
Ms. Elizabeth H Shuler	M = M / D = D / Y = Y = Y
[Electronically Filed] Date	10 18 2012
Signature	

(SCHEDULE E)	PAGE 92 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	filed on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFL-CIO	Date
Mailing Address 815 - 16th Street, NW	10 / 16 / 2012
	Amount
City State Zip Code Washington DC 20006	34.52
*** 3 **	Transaction ID : D466467
Purpose of Expenditure Walk Packets Category/ Type 004	Office Sought: House State: PA Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President
KEITH ROTHFUS	Check One: Support Oppose
Calcillat real-10-Date Fet Election	Disbursement For: Primary General O12 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
AFL-CIO	M M / D D / Y Y Y
Mailing Address 815 - 16th Street, NW	10 16 2012
	Amount
City State Zip Code	34.52
Washington DC 20006	Transaction ID : D466468
Purpose of Expenditure Walk Packets Category/ Type 004	Office Sought: House State: PA Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President
MARK CRITZ	Check One: Support Oppose
	Disbursement For: Primary General 012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	69.04
(b) SUBTOTAL of Unitemized Independent Expenditures	•
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	M = M / D = D / Y = Y = Y
[Electronically Filed] Date Signature	10 18 2012
	

SCHEDULE E)	PAGE 93 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFL-CIO	Date
Mailing Address 815 - 16th Street, NW	10 16 2012 Amount
City State Zip Code	Alliount
Washington DC 20006	54.85 Transaction ID : D466469
	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
DEAN HELLER Chec	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbut 2012	ursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	Date
Mailing Address 815 - 16th Street, NW	10 16 2012
5 5.5 75.11 5.11 5.11 5.11 5.11	Amount
City State Zip Code Washington DC 20006	54.85
	Transaction ID : D466470 e Sought: House State: NIV
Purpose of Expenditure Walk Packets Category/ Type Office	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	Rresident — ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
Shelley Berkley	
Calendar Year-To-Date Per Election for Office Sought 42456.41 Disbu	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	109.70
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not ma with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10) 18 2012
Signature	النتا لتا ا

SCHEDULE E)	PAGE 94 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFL-CIO	M M / D D / Y Y Y Y
Mailing Address 815 - 16th Street, NW	10 16 2012
	nount
City State Zip Code Washington DC 20006	61.60 nsaction ID : D466471
Purpose of Expenditure Walk Packets Category/ Type Office So	_
Name of Federal Candidate Supported or Opposed by Expenditure:	President 00
CONNIE MACK Check C	One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought Disburse 256429.75	ment For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	ate
Mailing Address 815 - 16th Street, NW	10 16 2012
	nount
City State Zip Code	61.60
Washington DC 20006	nsaction ID : D466472
Purpose of Expenditure Walk Packets Category/ Type Office So	
Name of Federal Candidate Supported or Opposed by Expenditure:	President
BILL NELSON Check C	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburse 256429.75	ment For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	123.20
(b) SUBTOTAL of Unitemized Independent Expenditures	
(b) 30BTOTAL of Officerinized independent Experiorities	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012
Signature	

SCHEDULE E)	PAGE 95 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	_
AFL-CIO	Date
Mailing Address 815 - 16th Street, NW	10 16 2012 Amount
City State Zip Code	
Washington DC 20006	80.59
	Sought: House State: WI Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
TAMMY BALDWIN Check	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbut 200558.54	rsement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	Date
Mailing Address 815 - 16th Street, NW	10 16 2012
	Amount
City State Zip Code	88.15
	ransaction ID : D466474
Purpose of Expenditure Walk Packets Category/ Type Office	Sought: House State: WI Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
TOMMY G THOMPSON Check	Cone: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 200558.54 Disbut	rsement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	168.74
(b) SUBTOTAL of Unitemized Independent Expenditures	
(4, 662.1611.2 61 6111611.1612.1111.1111.11	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

(SCHEDULE E)	PAGE 96 OF 101 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	t filed on
Full Name (Last, First, Middle Initial) of Payee	
AFL-CIO	Date
Mailing Address 815 - 16th Street, NW	10 16 2012 Amount
City. Chale 7in Code	Amount
City State Zip Code Washington DC 20006	143.54
Purpose of Expenditure Walk Packets Category/ Type 004	Transaction ID : D466475 Office Sought: House State: OH Senate District: 00
	President District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 348953.86	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	Date 10 16 2012
Mailing Address 815 - 16th Street, NW	10 10 2012
	Amount
City State Zip Code	143.54
Washington DC 20006	Transaction ID : D466476
Purpose of Expenditure Walk Packets Category/ Type 004	Office Sought: House State: OH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Sherrod Brown	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 348953.86	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	287.08
	7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	•
(c) TOTAL Independent Expenditures	·
Under penalty of perjury I certify that the independent expenditures reported herein were r with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Data	10 18 2012
[Electronically Filea] Date	10 10 7017

(SCHEDULE E)	PAGE 97 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report	ort filed on	
Full Name (Last, First, Middle Initial) of Payee		
AFL-CIO	Date	
Mailing Address 815 - 16th Street, NW	M 10 / 16 / 2012 Amount	
000	Amount	
City State Zip Code Washington DC 20006	414.32	
Purpose of Expenditure Category/ Category/	Transaction ID : D466477 Office Sought: House State:	
Walk Packets 004	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President —	
Willard Mitt Romney	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	Date	
Mailing Address 815 - 16th Street, NW	10 16 2012	
	Amount	
City State Zip Code	414.32	
Washington DC 20006	Transaction ID : D466478 Office Sought: House State:	
Purpose of Expenditure Walk Packets Category/ Type 004	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
Barack Obama	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 828.64	
(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	9 10 18 2012	
Signature		

SCHEDULE E)	PAGE 98 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report filed on	n M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	Date	
Mailing Address 815 - 16th Street, NW	10 16 2012 Amount	
	unoun	
City State Zip Code Washington DC 20006	7.56 ransaction ID : D466481	
Purpose of Expenditure Walk Packets Category/ Type Office 3	Sought: House State: OH Senate District: 06	
Name of Federal Candidate Supported or Opposed by Expenditure: Charlie Wilson Check	One: President Oppose	
Calendar Year-To-Date Per Election for Office Sought Disburs 2012	sement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	Date 10 16 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Mailing Address 815 - 16th Street, NW	Amount	
	aniount	
City State Zip Code Washington DC 20006	7.56 ransaction ID : D466482	
Purpose of Expenditure Walk Packets Category/ Type Office 3	Sought: House State: OH Senate District: 06	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON Check	One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disburs 2012	Sement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	15.12	
(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	18 2012	
Signature		

SCHEDULE E)	PAGE 99 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee		
AFL-CIO	ate	
Mailing Address 815 - 16th Street, NW	10 16 2012 mount	
City State Zip Code	mount	
Washington DC 20006	4.38 ansaction ID : D466485	
Purpose of Expenditure Walk Packets Category/ Type Office S		
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
TOM SMITH Check (One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought 93268.99 Disburse 2012	ement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	ate	
Mailing Address 815 - 16th Street, NW	10 16 2012	
	mount	
City State Zip Code	4.38	
Washington DC 20006	ansaction ID : D466486	
Purpose of Expenditure Walk Packets Category/ Type Office S		
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
Bob Casey Check C	One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought 93268.99 Disburse 2012	ement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	8.76	
	7 7 7	
(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	18 2012	
Signature	السنسا الساء	

SCHEDULE E)	PAGE 100 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report filed or	M = M / D = D / Y = Y = Y	
Check If 24-hour report 48-hour report New report Amends report filed or	`	
Full Name (Last, First, Middle Initial) of Payee Colleen O'Neill	Date	
Mailing Address 283 College Manor Drive	10 16 / Y Y Y Y Y Y	
	Amount	
City State Zip Code Arnold MD 21012	3.67 ansaction ID : D466503	
Purpose of Expenditure Proof Flier Category/ Type Office S		
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
DEAN HELLER Check		
Calendar Year-To-Date Per Election for Office Sought 5 63710.40 Disburs 2012	sement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Colleen O'Neill	Date	
Mailing Address 283 College Manor Drive	10 16 2012	
A	Amount	
City State Zip Code Arnold MD 21012	3.67	
Purpose of Expenditure Proof Flier Category/ Type Office S	Sought: House State: NV Senate District:	
Name of Federal Candidate Supported or Opposed by Expenditure: Shallow Barklay Check	One: President Oppose	
Shelley beinley		
Calendar Year-To-Date Per Election for Office Sought 42456.41 Disburs 2012	Sement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	7.34	
(b) CURTOTAL of Unitersimal Independent Funerality and	117117117	
(b) SUBTOTAL of Unitemized Independent Expenditures	1171171171	
(c) TOTAL Independent Expenditures	1 7 1 7 1 7	
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	/ DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		

SCHEDULE E)	PAGE 101 OF 101 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee		
Colleen O'Neill	Date	
Mailing Address 283 College Manor Drive	10 16 2012 Amount	
City State Zip Code		
Arnold MD 21012	3.67 Transaction ID : D466506	
Purpose of Expenditure Proof Flier Category/ Type 004	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
	k One: Support X Oppose	
Calendar Year-To-Date Per Election for Office Sought Disbut 2012	orsement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Colleen O'Neill	Date	
Mailing Address 283 College Manor Drive	10 16 2012	
	Amount	
City State Zip Code Arnold MD 21012	3.68	
	Transaction ID : D466507 Sought: House State: OH	
Type 004	Senate District: 00 President	
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown Check	k One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disbut 2012	ursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	7.25	
(a) SOBTOTAL OF REINIZED INDEPENDENT Expenditures	7.35	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	124221.89	
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	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature	النتا لتا ا	