

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Workers' Voice

ADDRESS (number and street) 815 - 16th Street, NW 7th Floor Washington DC 20006 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00484287 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 Year-End Report (YE) X, July 31 Mid-Year Report (Non-election Year Only) (MY), Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11) (Non-Election Year Only), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12) (Non-Election Year Only), Apr 20 (M4), Jul 20 (M7), Oct 20 (M10), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) Election on in the State of (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S) Election on in the State of

5. Covering Period 07 / 01 / 2015 through 12 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms. Elizabeth H Shuler

Signature of Treasurer Ms. Elizabeth H Shuler [Electronically Filed] Date 04 / 15 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Workers' Voice

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="227774.82"/>	<input type="text" value="227774.82"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="243694.99"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="3167284.63"/>	<input type="text" value="4532521.65"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="3410979.62"/>	<input type="text" value="4760296.47"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3363233.67"/>	<input type="text" value="4712550.52"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="47745.95"/>	<input type="text" value="47745.95"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="55023.34"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Workers' Voice

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	934652.14	2019652.14
(ii) Unitemized	190.00	185.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	934842.14	2019837.14
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	232397.48	432397.48
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1167239.62	2452234.62
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	61815.29
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2000045.01	2018471.74
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	3167284.63	4532521.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3167284.63	4532521.65

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	689650.66	1357054.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	689650.66	1357054.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	10000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	2673583.01	3345496.01
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3363233.67	4712550.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3363233.67	4712550.52

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 233
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Workers' Voice

A. AFL-CIO COPE Treasury

Full Name (Last, First, Middle Initial)
Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1610300.66

Date of Receipt
10 / 31 / 2015
Transaction ID : C10343830

Amount of Each Receipt this Period
5193.77

Memo Item

* In-Kind: Non Federal Inkind Staff

B. AFL-CIO COPE Treasury

Full Name (Last, First, Middle Initial)
Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1610300.66

Date of Receipt
10 / 31 / 2015
Transaction ID : C10377354

Amount of Each Receipt this Period
238.90

Memo Item

* In-Kind: Non Federal Staff Expenses

C. AFL-CIO COPE Treasury

Full Name (Last, First, Middle Initial)
Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1610300.66

Date of Receipt
11 / 01 / 2015
Transaction ID : C10377005

Amount of Each Receipt this Period
980.27

Memo Item

* In-Kind: Non Federal In Kind Staff

SUBTOTAL of Receipts This Page (optional).....	6412.94
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 7 OF 233
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

Date of Receipt 11 / 02 / 2015
Transaction ID : C10343816
 Amount of Each Receipt this Period 1409.92
 Memo Item
 * In-Kind: Non Federal Inkind Staff

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

Date of Receipt 11 / 02 / 2015
Transaction ID : C10377353
 Amount of Each Receipt this Period 238.90
 Memo Item
 * In-Kind: Non Federal Staff Expenses

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

Date of Receipt 11 / 03 / 2015
Transaction ID : C10377345
 Amount of Each Receipt this Period 238.90
 Memo Item
 * In-Kind: Non Federal Staff Expenses

SUBTOTAL of Receipts This Page (optional).....▶	1887.72
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 233
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1610300.66

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

Transaction ID : C10376280

Amount of Each Receipt this Period
517000.00

Memo Item

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

Mailing Address 1424 N. Pennsylvania Street

City Indianapolis State IN Zip Code 46202

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1474.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2015

Transaction ID : C10343798

Amount of Each Receipt this Period
1474.16

Memo Item

* In-Kind: Non Federal In Kind Staff

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

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312116.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2015

Transaction ID : C10343799

Amount of Each Receipt this Period
73529.48

Memo Item

* In-Kind: Non Federal In Kind Staff

SUBTOTAL of Receipts This Page (optional).....	592003.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 233
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. AFSCME Special Account

Full Name (Last, First, Middle Initial)
Mailing Address 1625 L Street, NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312116.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2015

Transaction ID : C10343817

Amount of Each Receipt this Period
5183.44

Memo Item

* In-Kind: Non Federal Inkind Staff

B. AFSCME Special Account

Full Name (Last, First, Middle Initial)
Mailing Address 1625 L Street, NW

City Washington	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312116.92

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

Transaction ID : C10328325

Amount of Each Receipt this Period
100000.00

Memo Item

* In-Kind: Non Federal Canvassing Program

C. AFSCME Special Account

Full Name (Last, First, Middle Initial)
Mailing Address 1625 L Street, NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312116.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : C10328317

Amount of Each Receipt this Period
500.00

Memo Item

* In-Kind: Non Federal Voter Calls

SUBTOTAL of Receipts This Page (optional).....	105683.44
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 10 OF 233
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312116.92

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

Amount of Each Receipt this Period
4000.00

Memo Item

* In-Kind: Non Federal Voter Calls

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

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312116.92

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

Amount of Each Receipt this Period
3168.00

Memo Item

* In-Kind: Non Federal Phonebank Survey

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

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312116.92

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

Amount of Each Receipt this Period
4800.00

Memo Item

* In-Kind: Non Federal Phonebank Survey

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

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

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

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

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312116.92

Date of Receipt
 11 / 03 / 2015
Transaction ID : C10339242

Amount of Each Receipt this Period
 100000.00

Memo Item

* In-Kind: Non Federal Canvassing Program

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

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312116.92

Date of Receipt
 11 / 18 / 2015
Transaction ID : C10342384

Amount of Each Receipt this Period
 5856.00

Memo Item

* In-Kind: Non Federal Survey Prep

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

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312116.92

Date of Receipt
 11 / 25 / 2015
Transaction ID : C10342380

Amount of Each Receipt this Period
 8800.00

Memo Item

* In-Kind: Non Federal Persuasion VoterID Calls

SUBTOTAL of Receipts This Page (optional).....▶	114656.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 233
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312116.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : C10343397

Amount of Each Receipt this Period
350.00

Memo Item

* In-Kind: Non Federal Postage

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

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312116.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : C10358814

Amount of Each Receipt this Period
5930.00

Memo Item

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

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

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
28946.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2015

Transaction ID : C10343800

Amount of Each Receipt this Period
3946.72

Memo Item

* In-Kind: Non Federal In Kind Staff

SUBTOTAL of Receipts This Page (optional).....	10226.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 233
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
28946.72

Date of Receipt
12 / 07 / 2015

Transaction ID : C10376745

Amount of Each Receipt this Period
25000.00

Memo Item

* In-Kind: Non Federal Canvassing

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

Mailing Address PO Box 11525

City Austin State TX Zip Code 78711

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7000.00

Date of Receipt
12 / 14 / 2015

Transaction ID : C10358812

Amount of Each Receipt this Period
7000.00

Memo Item

* In-Kind: NonFed Paid Canvass

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

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4373.20

Date of Receipt
10 / 02 / 2015

Transaction ID : C10343803

Amount of Each Receipt this Period
1761.40

Memo Item

* In-Kind: Non Federal In Kind Staff

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 233
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Workers' Voice

A. Firemen and Oilers Political League

Full Name (Last, First, Middle Initial)
Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4373.20

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

Amount of Each Receipt this Period
2611.80

Memo Item

* In-Kind: Non Federal Inkind Staff

B. Greater Louisville Central Labor Council

Full Name (Last, First, Middle Initial)
Mailing Address 1244 South Fourth Street

City Louisville State KY Zip Code 40203

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6403.96

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

Amount of Each Receipt this Period
6230.88

Memo Item

* In-Kind: Non Federal In Kind Staff

C. Greater Louisville Central Labor Council

Full Name (Last, First, Middle Initial)
Mailing Address 1244 South Fourth Street

City Louisville State KY Zip Code 40203

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6403.96

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

Amount of Each Receipt this Period
173.08

Memo Item

* In-Kind: Non Federal Inkind Staff

SUBTOTAL of Receipts This Page (optional).....▶	9015.76
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 233
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

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

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

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

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

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

SUBTOTAL of Receipts This Page (optional).....▶	15599.90
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)
A. JCAESP/AFSCME Local 4011 General Fund
Mailing Address 4315 Preston Highway
Suite 101
City Louisville State KY Zip Code 40213
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
295.36

Date of Receipt
10 / 28 / 2015
Transaction ID : C10343822
Amount of Each Receipt this Period
295.36
 Memo Item
* In-Kind: Non Federal Inkind Staff

Full Name (Last, First, Middle Initial)
B. NCFO/SEIU 32BJ
Mailing Address 1212 Bath Ave
Floor F&O
City Ashland State KY Zip Code 41101-2696
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 19 / 2015
Transaction ID : C10328364
Amount of Each Receipt this Period
5000.00
 Memo Item

Full Name (Last, First, Middle Initial)
C. Northeast Pennsylvania Area Labor Federation General Fund
Mailing Address 1258 O'Neill Hwy
City Scranton State PA Zip Code 18512
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5008.30

Date of Receipt
10 / 09 / 2015
Transaction ID : C10343807
Amount of Each Receipt this Period
4836.37
 Memo Item
* In-Kind: Non Federal In Kind Staff

SUBTOTAL of Receipts This Page (optional).....▶ 10131.73
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 233
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

Mailing Address 1258 O'Neill Hwy

City State Zip Code
Scranton PA 18512

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5008.30

Date of Receipt
10 / 30 / 2015
Transaction ID : C10343832

Amount of Each Receipt this Period
171.93

Memo Item

* In-Kind: Non Federal Inkind Staff

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

Mailing Address 1276 Liberty Street

City State Zip Code
Franklin PA 16323

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3798.49

Date of Receipt
10 / 22 / 2015
Transaction ID : C10343809

Amount of Each Receipt this Period
3348.84

Memo Item

* In-Kind: Non Federal In Kind Staff

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

Mailing Address 1276 Liberty Street

City State Zip Code
Franklin PA 16323

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3798.49

Date of Receipt
10 / 24 / 2015
Transaction ID : C10343835

Amount of Each Receipt this Period
449.65

Memo Item

* In-Kind: Non Federal Inkind Staff

SUBTOTAL of Receipts This Page (optional)..... ▶ 3970.42

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 233
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Workers' Voice

A. Ohio AFL-CIO General Fund

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

City Columbus State OH Zip Code 43215

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5577.00

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

Amount of Each Receipt this Period
5577.00

Memo Item

* In-Kind: Non Federal In Kind Staff

B. Philadelphia AFL-CIO Council General Fund

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

City Philadelphia State PA Zip Code 19103

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6906.27

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

Amount of Each Receipt this Period
6906.27

Memo Item

* In-Kind: Non Federal In Kind Staff

C. Planned Parenthood Texas Votes

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

City Austin State TX Zip Code 78704

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1030.44

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

Amount of Each Receipt this Period
1030.44

Memo Item

* In-Kind: Non Federal In Kind Staff

SUBTOTAL of Receipts This Page (optional).....	13513.71
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 19 OF 233
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

Mailing Address 1500 N. Second Street
Suite 11

City Harrisburg State PA Zip Code 17102

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1509.31

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : C10344752

Amount of Each Receipt this Period
1509.31

Memo Item

* In-Kind: Nonfederal Inkind Staff

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

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4311.45

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 16 / 2015

Transaction ID : C10343813

Amount of Each Receipt this Period
4311.45

Memo Item

* In-Kind: Non Federal In Kind Staff

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 233
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

Mailing Address 501 3RD STREET, NW

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
199363.99

Date of Receipt

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

Transaction ID : C10343801

Amount of Each Receipt this Period
4921.02

Memo Item

* In-Kind: Non Federal In Kind Staff

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

Mailing Address 501 3RD STREET, NW

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
199363.99

Date of Receipt

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

Transaction ID : C10375441

Amount of Each Receipt this Period
24278.80

Memo Item

* In-Kind: Non Federal Inkind Staff

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

Mailing Address 501 3RD STREET, NW

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
199363.99

Date of Receipt

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

Transaction ID : C10323745

Amount of Each Receipt this Period
2500.00

Memo Item

* In-Kind: Non Federal Printing

SUBTOTAL of Receipts This Page (optional).....▶	31699.82
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 233
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

Mailing Address 501 3RD STREET, NW

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
199363.99

Date of Receipt

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

Transaction ID : C10323747

Amount of Each Receipt this Period
2100.00

Memo Item

* In-Kind: Non Federal Postage

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

Mailing Address 501 3RD STREET, NW

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
199363.99

Date of Receipt

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

Transaction ID : C10343660

Amount of Each Receipt this Period
16027.74

Memo Item

* In-Kind: Non Federal Printing

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

Mailing Address 501 3RD STREET, NW

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
199363.99

Date of Receipt

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

Transaction ID : C10343666

Amount of Each Receipt this Period
985.00

Memo Item

* In-Kind: Non Federal Printing

SUBTOTAL of Receipts This Page (optional).....	19112.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 233
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

Mailing Address 501 3RD STREET, NW

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
199363.99

Date of Receipt: 11 / 23 / 2015
Transaction ID : C10343670
 Amount of Each Receipt this Period: 40000.00
 Memo Item
 * In-Kind: Non Federal Canvassing

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

Mailing Address 501 3RD STREET, NW

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
199363.99

Date of Receipt: 11 / 24 / 2015
Transaction ID : C10343686
 Amount of Each Receipt this Period: 60000.00
 Memo Item
 * In-Kind: Non Federal Canvassing

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

Mailing Address 501 3RD STREET, NW

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
199363.99

Date of Receipt: 12 / 01 / 2015
Transaction ID : C10343650
 Amount of Each Receipt this Period: 3055.67
 Memo Item
 * In-Kind: Housing for Non Federal Canvassers

SUBTOTAL of Receipts This Page (optional).....	103055.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 233
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

Mailing Address 501 3RD STREET, NW

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
199363.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2015

Transaction ID : C10345224

Amount of Each Receipt this Period
30000.00

Memo Item

* In-Kind: Non Federal Canvassing

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

Mailing Address 501 3RD STREET, NW

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
199363.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2015

Transaction ID : C10358820

Amount of Each Receipt this Period
15495.76

Memo Item

* In-Kind: Non Federal Printing

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

Mailing Address 501 THIRD STREET, NW

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2015

Transaction ID : C10358817

Amount of Each Receipt this Period
2150.00

Memo Item

* In-Kind: Non Federal Pledge Cards

SUBTOTAL of Receipts This Page (optional).....	47645.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 233
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

Mailing Address 1775 K Street, NW

City Washington	State DC	Zip Code 20006-1598
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
21763.55

Date of Receipt

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

Transaction ID : C10343814

Amount of Each Receipt this Period
11428.46

Memo Item

* In-Kind: Non Federal In Kind Staff

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

Mailing Address 1775 K Street, NW

City Washington	State DC	Zip Code 20006-1598
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
21763.55

Date of Receipt

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

Transaction ID : C10343825

Amount of Each Receipt this Period
10335.09

Memo Item

* In-Kind: Non Federal Inkind Staff

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

Mailing Address 80 F STREET NW

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9119.94

Date of Receipt

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

Transaction ID : C10343828

Amount of Each Receipt this Period
3640.97

Memo Item

* In-Kind: Non Federal Inkind Staff

SUBTOTAL of Receipts This Page (optional).....▶	25404.52
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 233
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Workers' Voice

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

Mailing Address 80 F STREET NW

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9119.94

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

Transaction ID : C10343815

Amount of Each Receipt this Period
4252.24

Memo Item

* In-Kind: Non Federal In Kind Staff

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

Mailing Address 80 F STREET NW

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9119.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2015

Transaction ID : C10343837

Amount of Each Receipt this Period
1226.73

Memo Item

* In-Kind: Non Federal Inkind Staff

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5478.97
TOTAL This Period (last page this line number only).....	232397.48

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

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

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

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

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFL-CIO

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Reimbursement for Network Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 09 / 2015

Transaction ID : D576039

Amount of Each Disbursement this Period

2250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. AFL-CIO

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Reimbursement for Staff Related Costs

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 09 / 2015

Transaction ID : D576040

Amount of Each Disbursement this Period

13074.63

Memo Item

Full Name (Last, First, Middle Initial)

C. AFL-CIO

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Reimbursement for Staff Related Costs

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 09 / 2015

Transaction ID : D576041

Amount of Each Disbursement this Period

13729.78

Memo Item

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

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

29054.41

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFL-CIO

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Reimbursement for Network Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2015

Transaction ID : D578576

Amount of Each Disbursement this Period

2250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. AFL-CIO

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Reimbursement for Network Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : D579015

Amount of Each Disbursement this Period

2250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. AFL-CIO

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Reimbursement for Network Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2015

Transaction ID : D580291

Amount of Each Disbursement this Period

2250.00

Memo Item

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

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

6750.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFL-CIO

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Reimbursement for Network Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Transaction ID : D580292

Amount of Each Disbursement this Period

2250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. AFL-CIO

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Reimbursement for Staff Related Costs

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement

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

Transaction ID : D581661

Amount of Each Disbursement this Period

10079.73

Memo Item

Full Name (Last, First, Middle Initial)

C. AFL-CIO

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Reimbursement for Staff Related Costs

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement

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

Transaction ID : D581662

Amount of Each Disbursement this Period

156022.68

Memo Item

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

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

168352.41

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFL-CIO

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Reimbursement for Staff Related Costs

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D581749

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. AFL-CIO

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Reimbursement for Staff Related Costs

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D581771

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. AFL-CIO

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Reimbursement for Network Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D584729

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Calibre CPA Group, PLLC

Mailing Address 1850 K Street, NW #1050

City Washington State DC Zip Code 20006

Purpose of Disbursement
Audit Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2015

Transaction ID : D577306

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Calibre CPA Group, PLLC

Mailing Address 1850 K Street, NW #1050

City Washington State DC Zip Code 20006

Purpose of Disbursement
Audit Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 06 / 2015

Transaction ID : D575590

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Calibre CPA Group, PLLC

Mailing Address 1850 K Street, NW #1050

City Washington State DC Zip Code 20006

Purpose of Disbursement
Audit Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2015

Transaction ID : D578575

Amount of Each Disbursement this Period

1250.00

Memo Item

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

9250.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Evans & Katz, LLC

Mailing Address P. O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement
Compliance Services

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2015

Transaction ID : D578797

Amount of Each Disbursement this Period

279.45

Memo Item

Full Name (Last, First, Middle Initial)

B. Evans & Katz, LLC

Mailing Address P. O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement
Compliance Services

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 23 / 2015

Transaction ID : D577305

Amount of Each Disbursement this Period

1261.60

Memo Item

Full Name (Last, First, Middle Initial)

C. Evans & Katz, LLC

Mailing Address P. O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement
Compliance Services

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 06 / 2015

Transaction ID : D575020

Amount of Each Disbursement this Period

818.10

Memo Item

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

2359.15

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Evans & Katz, LLC

Mailing Address P. O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement
Compliance Services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579212

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Evans & Katz, LLC

Mailing Address P. O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement
Compliance Services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580289

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Evans & Katz, LLC

Mailing Address P. O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement
Compliance Services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D584370

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Evans & Katz, LLC

Mailing Address P. O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement
Compliance Services

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2015

Transaction ID : D584371

Amount of Each Disbursement this Period

3,000.00 1506.15

Memo Item

Full Name (Last, First, Middle Initial)

B. Ms. Kimberly C. Farrell

Mailing Address 1622 Old Town Rd

City Edgewater State MD Zip Code 21037

Purpose of Disbursement
Compliance Consulting

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2015

Transaction ID : D578465

Amount of Each Disbursement this Period

360.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NGP VAN, INC.

Mailing Address 1225 Eye Street, NW
Suite 1225

City Washington State DC Zip Code 20005

Purpose of Disbursement
Software and Support

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2015

Transaction ID : D578796

Amount of Each Disbursement this Period

1200.00

Memo Item

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

3066.15

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. NGP VAN, INC.

Mailing Address 1225 Eye Street, NW
Suite 1225

City Washington State DC Zip Code 20005

Purpose of Disbursement
Software and Support

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D580422

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. NGP VAN, INC.

Mailing Address 1225 Eye Street, NW
Suite 1225

City Washington State DC Zip Code 20005

Purpose of Disbursement
Software and Support

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D584382

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Colleen M. O'Neill-Yanchulis

Mailing Address 283 College Manor Drive

City Arnold State MD Zip Code 21012

Purpose of Disbursement
Media Production Fliers

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D584381

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. The Atlas Project, Inc.

Mailing Address 888 16th Street, NW #333

City Washington State DC Zip Code 20006

Purpose of Disbursement
Research Services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D584384

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Trilogy Interactive, LLC

Mailing Address PO Box 4177

City Mountain View State CA Zip Code 94040-4177

Purpose of Disbursement
Auditing Services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578599

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Trilogy Interactive, LLC

Mailing Address PO Box 4177

City Mountain View State CA Zip Code 94040-4177

Purpose of Disbursement
Auditing Services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D575432

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Trilogy Interactive, LLC

Mailing Address PO Box 4177

City Mountain View State CA Zip Code 94040-4177

Purpose of Disbursement Auditing Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 14 / 2015

Transaction ID : D577304

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Trister, Ross, Schadler & Gold, PLLC

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement Legal Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 06 / 2015

Transaction ID : D575453

Amount of Each Disbursement this Period

4321.26

Memo Item

Full Name (Last, First, Middle Initial)

C. Trister, Ross, Schadler & Gold, PLLC

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement Legal Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 06 / 2015

Transaction ID : D575151

Amount of Each Disbursement this Period

7754.94

Memo Item

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

22076.20

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Trister, Ross, Schadler & Gold, PLLC

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement
Legal Services

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2015

Transaction ID : D578574

Amount of Each Disbursement this Period

1438.37

Memo Item

Full Name (Last, First, Middle Initial)

B. Trister, Ross, Schadler & Gold, PLLC

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement
Legal Services

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2015

Transaction ID : D578795

Amount of Each Disbursement this Period

796.90

Memo Item

Full Name (Last, First, Middle Initial)

C. Trister, Ross, Schadler & Gold, PLLC

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement
Legal Services

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2015

Transaction ID : D580423

Amount of Each Disbursement this Period

1923.90

Memo Item

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

4159.17

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Trister, Ross, Schadler & Gold, PLLC

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement
Legal Services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D584377

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Trister, Ross, Schadler & Gold, PLLC

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement
Legal Services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D584378

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Trister, Ross, Schadler & Gold, PLLC

Mailing Address 1666 Connecticut Avenue, NW 5th Fl

City Washington State DC Zip Code 20009

Purpose of Disbursement
Legal Services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D584379

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFL-CIO COPE Treasury

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Non Federal Inkind Staff-PA

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D581247

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFL-CIO COPE Treasury

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

AFL-CIO COPE Treasury

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D581248

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFL-CIO COPE Treasury

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Non Federal Staff Expenses

Category/
Type

Candidate Name

AFL-CIO COPE Treasury

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D581193

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFL-CIO COPE Treasury

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Non Federal Inkind Staff-PA

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581194

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFL-CIO COPE Treasury

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Non Federal Inkind Staff-PA

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581331

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFL-CIO COPE Treasury

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Non Federal Staff Expenses

Category/
Type

Candidate Name

AFL-CIO COPE Treasury

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581332

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFL-CIO COPE Treasury

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Non Federal Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2015

Transaction ID : D581333

Amount of Each Disbursement this Period

704.96

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFL-CIO COPE Treasury

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Non Federal Inkind Staff-PA

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2015

Transaction ID : D581393

Amount of Each Disbursement this Period

1748.54

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFL-CIO COPE Treasury

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Non Federal Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2015

Transaction ID : D581394

Amount of Each Disbursement this Period

704.96

Memo Item
* In-Kind

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

3158.46

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFL-CIO COPE Treasury

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Non Federal Staff Expenses

001

Category/
Type

Candidate Name

AFL-CIO COPE Treasury

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2015

Transaction ID : D581395

Amount of Each Disbursement this Period

238.90

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFL-CIO

Mailing Address 815 - 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Non-Contribution Refund

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2015

Transaction ID : D584733

Amount of Each Disbursement this Period

2000000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. AFSCME Indiana-Kentucky Organizing Committee 962 General Fund

Mailing Address 1424 N. Pennsylvania Street

City Indianapolis State IN Zip Code 46202

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2015

Transaction ID : D581405

Amount of Each Disbursement this Period

184.27

Memo Item
* In-Kind

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

2000423.17

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Indiana-Kentucky Organizing Committee 962 General Fund

Date of Disbursement

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

Mailing Address 1424 N. Pennsylvania Street

Transaction ID : D580912

City Indianapolis State IN Zip Code 46202

Amount of Each Disbursement this Period

368.54

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

Full Name (Last, First, Middle Initial)

B. AFSCME Indiana-Kentucky Organizing Committee 962 General Fund

Date of Disbursement

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

Mailing Address 1424 N. Pennsylvania Street

Transaction ID : D580558

City Indianapolis State IN Zip Code 46202

Amount of Each Disbursement this Period

368.54

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

Full Name (Last, First, Middle Initial)

C. AFSCME Indiana-Kentucky Organizing Committee 962 General Fund

Date of Disbursement

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

Mailing Address 1424 N. Pennsylvania Street

Transaction ID : D579708

City Indianapolis State IN Zip Code 46202

Amount of Each Disbursement this Period

368.54

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

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

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

1105.62

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Indiana-Kentucky Organizing Committee 962 General Fund

Mailing Address 1424 N. Pennsylvania Street

City Indianapolis State IN Zip Code 46202

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D579044

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D579045

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D579042

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579111

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578978

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578967

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 11 / 2015

Transaction ID : D578968

Amount of Each Disbursement this Period

460.24

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2015

Transaction ID : D578862

Amount of Each Disbursement this Period

897.90

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 07 / 2015

Transaction ID : D578863

Amount of Each Disbursement this Period

897.90

Memo Item
* In-Kind

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

2256.04

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2015

Transaction ID : D578928

Amount of Each Disbursement this Period

334.85

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2015

Transaction ID : D578929

Amount of Each Disbursement this Period

616.37

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2015

Transaction ID : D578930

Amount of Each Disbursement this Period

897.90

Memo Item
* In-Kind

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

1849.12

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578931

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578932

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578933

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578859

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578860

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578826

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 07 / 2015

Transaction ID : D578827

Amount of Each Disbursement this Period

897.90

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2015

Transaction ID : D578828

Amount of Each Disbursement this Period

897.90

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2015

Transaction ID : D578887

Amount of Each Disbursement this Period

616.37

Memo Item
* In-Kind

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

2412.17

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2015

Transaction ID : D578888

Amount of Each Disbursement this Period

897.90

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2015

Transaction ID : D578889

Amount of Each Disbursement this Period

897.90

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2015

Transaction ID : D578890

Amount of Each Disbursement this Period

897.90

Memo Item
* In-Kind

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

2693.70

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578891

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579249

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579250

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2015

Transaction ID : D579145

Amount of Each Disbursement this Period

230.12

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2015

Transaction ID : D579175

Amount of Each Disbursement this Period

563.05

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2015

Transaction ID : D579113

Amount of Each Disbursement this Period

897.90

Memo Item
* In-Kind

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

1691.07

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579131

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579139

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579142

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579158

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579159

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579277

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D579281

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D579309

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D579311

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2015

Transaction ID : D579320

Amount of Each Disbursement this Period

897.90

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2015

Transaction ID : D579331

Amount of Each Disbursement this Period

897.90

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2015

Transaction ID : D579335

Amount of Each Disbursement this Period

230.12

Memo Item
* In-Kind

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

2025.92

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D579590

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D579628

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D579709

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579712

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579663

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579690

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579693

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579735

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579738

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579755

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579779

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580346

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580347

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580281

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580282

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial) A. AFSCME Special Account		Date of Disbursement MM / DD / YYYY 10 / 06 / 2015
Mailing Address 1625 L Street, NW		Transaction ID : D579911
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 334.85
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item * In-Kind
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. AFSCME Special Account		Date of Disbursement MM / DD / YYYY 10 / 09 / 2015
Mailing Address 1625 L Street, NW		Transaction ID : D580050
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 460.24
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item * In-Kind
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. AFSCME Special Account		Date of Disbursement MM / DD / YYYY 10 / 09 / 2015
Mailing Address 1625 L Street, NW		Transaction ID : D580051
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 334.85
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item * In-Kind
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1129.94
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580559

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580561

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580589

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580519

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580549

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580469

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580491

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580496

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580905

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580906

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580953

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580954

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D580644

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D580651

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D580827

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580828

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580878

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580879

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D580972

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D580973

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D581059

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2015

Transaction ID : D581060

Amount of Each Disbursement this Period

897.90

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : D581089

Amount of Each Disbursement this Period

248.40

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : D581090

Amount of Each Disbursement this Period

460.24

Memo Item
* In-Kind

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

1606.54

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581091

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581114

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581115

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D581116

Amount of Each Disbursement this Period

730.48

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D582035

Amount of Each Disbursement this Period

460.24

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D582036

Amount of Each Disbursement this Period

460.24

Memo Item
* In-Kind

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

1650.96

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D582039

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D582040

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D582043

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D582044

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D582047

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D582048

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 14 / 2015

Transaction ID : D582033

Amount of Each Disbursement this Period

1150.54

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 16 / 2015

Transaction ID : D582051

Amount of Each Disbursement this Period

805.39

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D582053

Amount of Each Disbursement this Period

805.39

Memo Item
* In-Kind

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

2761.32

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D582055

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D582057

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D582295

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D582297

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D582298

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D582328

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D583559

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D583562

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D583565

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D583568

Amount of Each Disbursement this Period

805.39

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 08 / 2015

Transaction ID : D583569

Amount of Each Disbursement this Period

805.39

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 11 / 2015

Transaction ID : D583574

Amount of Each Disbursement this Period

1150.54

Memo Item
* In-Kind

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

2761.32

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D583575

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D583572

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
In-Kind Non Federal GOTV Calls

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D584356

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
In-Kind Non Federal Postage

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2015

Transaction ID : D584357

Amount of Each Disbursement this Period

350.00

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2015

Transaction ID : D581396

Amount of Each Disbursement this Period

897.90

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal Inkind Staff

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2015

Transaction ID : D581397

Amount of Each Disbursement this Period

1566.85

Memo Item
* In-Kind

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

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

2814.75

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581398

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal Inkind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581334

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581335

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D581336

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal Inkind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D581195

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D581249

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial) A. AFSCME Special Account		Date of Disbursement MM / DD / YYYY 11 / 01 / 2015
Mailing Address 1625 L Street, NW		Transaction ID : D581250
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal Inkind Staff	Amount of Each Disbursement this Period 509.72
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item * In-Kind
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. AFSCME Special Account		Date of Disbursement MM / DD / YYYY 11 / 01 / 2015
Mailing Address 1625 L Street, NW		Transaction ID : D581251
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 230.12
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item * In-Kind
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. AFSCME Special Account		Date of Disbursement MM / DD / YYYY 10 / 30 / 2015
Mailing Address 1625 L Street, NW		Transaction ID : D581145
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Non Federal In Kind Staff	Amount of Each Disbursement this Period 460.24
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item * In-Kind
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1200.08
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

A. AFSCME Special Account

Full Name (Last, First, Middle Initial)

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement Non Federal In Kind Staff

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 30 / 2015

Transaction ID : D581146

Amount of Each Disbursement this Period: 897.90

Memo Item
* In-Kind

B. AFSCME Special Account

Full Name (Last, First, Middle Initial)

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement Non Federal Inkind Staff

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 30 / 2015

Transaction ID : D581147

Amount of Each Disbursement this Period: 248.40

Memo Item
* In-Kind

C. AFSCME Special Account

Full Name (Last, First, Middle Initial)

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement Non Federal Canvassing Program

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 03 / 2015

Transaction ID : D584665

Amount of Each Disbursement this Period: 100000.00

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶ 101146.30

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal Voter Calls

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D584648

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal Voter Calls

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D584649

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal Canvassing Program

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D584650

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial) A. AFSCME Special Account		Date of Disbursement MM / DD / YYYY 10 / 16 / 2015
Mailing Address 1625 L Street, NW		Transaction ID : D584651
City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 3168.00	
Purpose of Disbursement Non Federal Phonebank Survey	<input type="checkbox"/> 005 Category/Type	<input type="checkbox"/> Memo Item * In-Kind
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. AFSCME Special Account		Date of Disbursement MM / DD / YYYY 11 / 03 / 2015
Mailing Address 1625 L Street, NW		Transaction ID : D584652
City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 4800.00	
Purpose of Disbursement Non Federal Phonebank Survey	<input type="checkbox"/> 005 Category/Type	<input type="checkbox"/> Memo Item * In-Kind
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. AFSCME Special Account		Date of Disbursement MM / DD / YYYY 11 / 25 / 2015
Mailing Address 1625 L Street, NW		Transaction ID : D584653
City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 8800.00	
Purpose of Disbursement Non Federal Persuasion Calls	<input type="checkbox"/> 005 Category/Type	<input type="checkbox"/> Memo Item * In-Kind
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	16768.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFSCME Special Account

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Federal Survey Prep

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D584654

Amount of Each Disbursement this Period

5856.00

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Non Federal Canvassing

Category/
Type

Candidate Name

AFT Solidarity

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D584730

Amount of Each Disbursement this Period

25000.00

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D581148

Amount of Each Disbursement this Period

493.34

Memo Item
* In-Kind

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

31349.34

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581266

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581338

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581400

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D581118

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D581093

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D581062

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. AFT Solidarity 527

Mailing Address 555 New Jersey Ave. N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2015

Transaction ID : D580956

Amount of Each Disbursement this Period

493.34

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Battleground Texas

Mailing Address PO Box 11525

City Austin State TX Zip Code 78711

Purpose of Disbursement
Non Federal Canvassing

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 14 / 2015

Transaction ID : D584655

Amount of Each Disbursement this Period

7000.00

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Committee to Elect Tommie Pierson, Sr.

Mailing Address 1269 Shepley Dr

City Saint Louis State MO Zip Code 63137-3506

Purpose of Disbursement
Non-Federal Contribution

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2015

Transaction ID : D578742

Amount of Each Disbursement this Period

10000.00

Memo Item

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

17493.34

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 14 / 2015

Transaction ID : D580475

Amount of Each Disbursement this Period

82.76

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2015

Transaction ID : D580498

Amount of Each Disbursement this Period

1798.43

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2015

Transaction ID : D580495

Amount of Each Disbursement this Period

82.76

Memo Item
* In-Kind

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

1963.95

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : D580470

Amount of Each Disbursement this Period

1798.43

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : D580552

Amount of Each Disbursement this Period

1798.43

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : D580520

Amount of Each Disbursement this Period

1798.43

Memo Item
* In-Kind

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

5395.29

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : D580512

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : D580565

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : D580052

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2015

Transaction ID : D580053

Amount of Each Disbursement this Period

899.21

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2015

Transaction ID : D580957

Amount of Each Disbursement this Period

1881.19

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2015

Transaction ID : D580908

Amount of Each Disbursement this Period

82.76

Memo Item
* In-Kind

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

2863.16

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : D580909

Amount of Each Disbursement this Period

1798.43

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : D580881

Amount of Each Disbursement this Period

1798.43

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : D580882

Amount of Each Disbursement this Period

82.76

Memo Item
* In-Kind

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

3679.62

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 21 / 2015

Transaction ID : D580830

Amount of Each Disbursement this Period

1798.43

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 21 / 2015

Transaction ID : D580831

Amount of Each Disbursement this Period

82.76

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : D581094

Amount of Each Disbursement this Period

1798.43

Memo Item
* In-Kind

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

3679.62

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : D581095

Amount of Each Disbursement this Period

82.76

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 25 / 2015

Transaction ID : D580974

Amount of Each Disbursement this Period

1881.19

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2015

Transaction ID : D581119

Amount of Each Disbursement this Period

82.76

Memo Item
* In-Kind

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

2046.71

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2015

Transaction ID : D581120

Amount of Each Disbursement this Period

1798.43

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2015

Transaction ID : D581401

Amount of Each Disbursement this Period

1798.43

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2015

Transaction ID : D581402

Amount of Each Disbursement this Period

82.76

Memo Item
* In-Kind

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

3679.62

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2015

Transaction ID : D581339

Amount of Each Disbursement this Period

82.76

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2015

Transaction ID : D581340

Amount of Each Disbursement this Period

1798.43

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2015

Transaction ID : D581267

Amount of Each Disbursement this Period

82.76

Memo Item
* In-Kind

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

1963.95

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2015

Transaction ID : D581196

Amount of Each Disbursement this Period

1798.43

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Inkind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2015

Transaction ID : D581149

Amount of Each Disbursement this Period

1798.43

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2015

Transaction ID : D581150

Amount of Each Disbursement this Period

82.76

Memo Item
* In-Kind

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

3679.62

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Printing

004

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 13 / 2015

Transaction ID : D584656

Amount of Each Disbursement this Period

2500.00

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Postage

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 13 / 2015

Transaction ID : D584657

Amount of Each Disbursement this Period

2100.00

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Housing for Canvassers

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2015

Transaction ID : D584658

Amount of Each Disbursement this Period

3055.67

Memo Item
* In-Kind

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

7655.67

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Printing

004

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2015

Transaction ID : D584659

Amount of Each Disbursement this Period

16027.74

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Printing

004

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2015

Transaction ID : D584660

Amount of Each Disbursement this Period

985.00

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Canvassing

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 23 / 2015

Transaction ID : D584661

Amount of Each Disbursement this Period

10000.00

Memo Item
* In-Kind

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

117012.74

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Canvassing

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2015

Transaction ID : D584662

Amount of Each Disbursement this Period

30000.00

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. COMMUNICATIONS WORKERS OF AMERICA WORKING VOICES

Mailing Address 501 3RD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Printing

004

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2015

Transaction ID : D584471

Amount of Each Disbursement this Period

15495.76

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 501 THIRD STREET, NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Non Federal Pledge Cards

001

Candidate Name
COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2015

Transaction ID : D584663

Amount of Each Disbursement this Period

2150.00

Memo Item
* In-Kind

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

47645.76

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581154

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581271

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581344

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal Inkind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D581407

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal Inkind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D581125

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal Inkind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D581099

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D580977

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal Inkind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D580643

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal Inkind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D580835

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : D580057

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : D579912

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal Inkind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : D579783

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal Inkind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580285

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579780

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579739

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal Inkind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579733

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal Inkind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579714

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579710

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal Inkind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D580351

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D580352

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Firemen and Oilers Political League

Mailing Address NCFO
1212 Bath Ave.

City Ashland State KY Zip Code 41101

Purpose of Disbursement
Non Federal Inkind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D580476

Amount of Each Disbursement this Period

Memo Item
* In-Kind

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Greater Louisville Central Labor Council

Mailing Address 1244 South Fourth Street

City State Zip Code
Louisville KY 40203

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D580494

Amount of Each Disbursement this Period

173.08

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Greater Louisville Central Labor Council

Mailing Address 1244 South Fourth Street

City State Zip Code
Louisville KY 40203

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D580511

Amount of Each Disbursement this Period

173.08

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Greater Louisville Central Labor Council

Mailing Address 1244 South Fourth Street

City State Zip Code
Louisville KY 40203

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D580350

Amount of Each Disbursement this Period

173.08

Memo Item
* In-Kind

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

519.24

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Greater Louisville Central Labor Council

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	1	5

Mailing Address 1244 South Fourth Street

Transaction ID : D580473

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

1	7	3	.	0	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

Full Name (Last, First, Middle Initial)

B. Greater Louisville Central Labor Council

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	1	5

Mailing Address 1244 South Fourth Street

Transaction ID : D580564

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

1	7	3	.	0	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

Full Name (Last, First, Middle Initial)

C. Greater Louisville Central Labor Council

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

Mailing Address 1244 South Fourth Street

Transaction ID : D579660

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

1	7	3	.	0	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

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

5	1	9	.	2	4
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TOTAL This Period (last page this line number only)..... ▶

5	1	9	.	2	4
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Greater Louisville Central Labor Council

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	3			2	0	1	5		

Mailing Address 1244 South Fourth Street

Transaction ID : D579734

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

8	6	.	5	4
---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Greater Louisville Central Labor Council

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	1			2	0	1	5		

Mailing Address 1244 South Fourth Street

Transaction ID : D579692

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

1	7	.	3	0	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Greater Louisville Central Labor Council

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	4			2	0	1	5		

Mailing Address 1244 South Fourth Street

Transaction ID : D579759

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

1	7	.	3	0	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

4	3	.	2	7	0
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TOTAL This Period (last page this line number only)..... ▶

4	3	.	2	7	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D579732

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

86.54

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

Full Name (Last, First, Middle Initial)

B. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D580284

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

173.08

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

Full Name (Last, First, Middle Initial)

C. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D580056

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

173.08

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

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

432.70

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

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

Mailing Address 1244 South Fourth Street

City Louisville State KY Zip Code 40203

Purpose of Disbursement Non Federal In Kind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type: **001**

Date of Disbursement: 10 / 05 / 2015

Transaction ID : **D579782**

Amount of Each Disbursement this Period: 173.08

Memo Item
* In-Kind

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

Mailing Address 1244 South Fourth Street

City Louisville State KY Zip Code 40203

Purpose of Disbursement Non Federal In Kind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type: **001**

Date of Disbursement: 09 / 29 / 2015

Transaction ID : **D579626**

Amount of Each Disbursement this Period: 173.08

Memo Item
* In-Kind

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

Mailing Address 1244 South Fourth Street

City Louisville State KY Zip Code 40203

Purpose of Disbursement Non Federal In Kind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type: **001**

Date of Disbursement: 09 / 28 / 2015

Transaction ID : **D579592**

Amount of Each Disbursement this Period: 173.08

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶ 519.24

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Greater Louisville Central Labor Council

Mailing Address 1244 South Fourth Street

City Louisville State KY Zip Code 40203

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2015

Transaction ID : D579333

Amount of Each Disbursement this Period

173.08

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Greater Louisville Central Labor Council

Mailing Address 1244 South Fourth Street

City Louisville State KY Zip Code 40203

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2015

Transaction ID : D579322

Amount of Each Disbursement this Period

173.08

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Greater Louisville Central Labor Council

Mailing Address 1244 South Fourth Street

City Louisville State KY Zip Code 40203

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2015

Transaction ID : D579313

Amount of Each Disbursement this Period

173.08

Memo Item
* In-Kind

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

519.24

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Greater Louisville Central Labor Council

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	1	5		

Mailing Address 1244 South Fourth Street

Transaction ID : D579133

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

1	7	3	.	0	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

B. Greater Louisville Central Labor Council

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	1	5		

Mailing Address 1244 South Fourth Street

Transaction ID : D579141

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

1	7	3	.	0	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

C. Greater Louisville Central Labor Council

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	8			2	0	1	5		

Mailing Address 1244 South Fourth Street

Transaction ID : D579162

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

1	7	3	.	0	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

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

5	1	9	.	2	4
---	---	---	---	---	---

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

5	1	9	.	2	4
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D579252

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

173.08

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

Full Name (Last, First, Middle Initial)

B. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D579178

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

173.08

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

Full Name (Last, First, Middle Initial)

C. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D579276

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

173.08

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

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

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

519.24

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D580642

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

173.08

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

Full Name (Last, First, Middle Initial)

B. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D580592

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

173.08

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

Full Name (Last, First, Middle Initial)

C. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D580913

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

173.08

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

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

519.24

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D580834

City Louisville State KY Zip Code 40203

Amount of Each Disbursement this Period

173.08

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

Full Name (Last, First, Middle Initial)

B. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D580885

City Louisville State KY Zip Code 40203

Amount of Each Disbursement this Period

173.08

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

Full Name (Last, First, Middle Initial)

C. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D580959

City Louisville State KY Zip Code 40203

Amount of Each Disbursement this Period

173.08

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

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

519.24

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D580976

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

173.08

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

Full Name (Last, First, Middle Initial)

B. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D581064

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

173.08

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

Full Name (Last, First, Middle Initial)

C. Greater Louisville Central Labor Council

Date of Disbursement

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

Mailing Address 1244 South Fourth Street

Transaction ID : D581098

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

173.08

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

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

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

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

519.24

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Greater Louisville Central Labor Council

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	1	5		

Mailing Address 1244 South Fourth Street

Transaction ID : D581123

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

8	6	.	5	4
---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff

0	0	1
Category/ Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

B. Greater Louisville Central Labor Council

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	1	5		

Mailing Address 1244 South Fourth Street

Transaction ID : D581124

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

8	6	.	5	4
---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/ Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

C. Greater Louisville Central Labor Council

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	3			2	0	1	5		

Mailing Address 1244 South Fourth Street

Transaction ID : D581406

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

1	7	3	.	0	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/ Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

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

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

3	4	6	.	1	6
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Greater Louisville Central Labor Council

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	2			2	0	1	5		

Mailing Address 1244 South Fourth Street

Transaction ID : D581343

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

1	7	3	.	0	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

B. Greater Louisville Central Labor Council

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	0			2	0	1	5		

Mailing Address 1244 South Fourth Street

Transaction ID : D581153

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

1	7	3	.	0	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

C. Greater Louisville Central Labor Council

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	5		

Mailing Address 1244 South Fourth Street

Transaction ID : D581270

City State Zip Code
Louisville KY 40203

Amount of Each Disbursement this Period

1	7	3	.	0	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

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

5	1	9	.	2	4
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TOTAL This Period (last page this line number only)..... ▶

5	1	9	.	2	4
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial) A. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 10 / 29 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D581113
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 10 / 30 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D581144
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 11 / 02 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D581330
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	814.35
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 23 / 2015

Transaction ID : D582037

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 11 / 2015

Transaction ID : D582038

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2015

Transaction ID : D582032

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

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

814.35

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial) A. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 11 / 16 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D582052
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 11 / 14 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D582034
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 11 / 21 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D582049
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....▶	814.35
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 19 / 2015

Transaction ID : D582050

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D582045

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 12 / 2015

Transaction ID : D582046

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

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

814.35

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial) A. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 11 / 20 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D582041
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 11 / 18 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D582042
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 12 / 05 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D583573
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....▶	814.35
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial) A. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 12 / 11 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D583576
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 135.73
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 12 / 09 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D583577
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 12 / 08 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D583578
City Houston	State TX	
Purpose of Disbursement Non Federal Inkind Staff	Candidate Name	Amount of Each Disbursement this Period 135.73
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	542.91
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial) A. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 12 / 10 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D583570
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 12 / 08 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D583571
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 135.73
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 12 / 04 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D583566
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....▶	678.63
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2015

Transaction ID : D583567

Amount of Each Disbursement this Period

135.73

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 12 / 2015

Transaction ID : D583563

Amount of Each Disbursement this Period

135.73

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 07 / 2015

Transaction ID : D583564

Amount of Each Disbursement this Period

135.73

Memo Item
* In-Kind

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

407.19

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D583560

Amount of Each Disbursement this Period

135.73

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal Inkind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D583561

Amount of Each Disbursement this Period

135.73

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2015

Transaction ID : D582329

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

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

542.91

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial) A. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D582299
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 12 / 02 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D582300
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 12 / 01 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D582296
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	814.35
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial) A. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 11 / 10 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D582056
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 11 / 13 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D582054
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 10 / 27 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D581058
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	814.35
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : D581088

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2015

Transaction ID : D580971

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2015

Transaction ID : D580904

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

814.35

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial) A. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 10 / 24 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D580952
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Category/Type 001		<input type="checkbox"/> Memo Item * In-Kind
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 10 / 22 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D580877
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Category/Type 001		<input type="checkbox"/> Memo Item * In-Kind
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 10 / 20 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D580645
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Category/Type 001		<input type="checkbox"/> Memo Item * In-Kind
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	814.35
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 21 / 2015

Transaction ID : D580826

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 21 / 2015

Transaction ID : D579253

Amount of Each Disbursement this Period

135.73

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 19 / 2015

Transaction ID : D579174

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

678.63

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2015

Transaction ID : D579317

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2015

Transaction ID : D579278

Amount of Each Disbursement this Period

135.73

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2015

Transaction ID : D579336

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

678.63

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial) A. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 09 / 28 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D579588
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 135.73
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 10 / 09 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D580049
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. Harris County AFL-CIO Council		Date of Disbursement MM / DD / YYYY 10 / 06 / 2015
Mailing Address 2505 Sutherland		Transaction ID : D579914
City Houston	State TX	
Purpose of Disbursement Non Federal In Kind Staff	Candidate Name	Amount of Each Disbursement this Period 271.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

678.63

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 05 / 2015

Transaction ID : D579784

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 12 / 2015

Transaction ID : D580280

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 04 / 2015

Transaction ID : D579756

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

814.35

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579736

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579661

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579694

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 02 / 2015

Transaction ID : D579713

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 19 / 2015

Transaction ID : D580582

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 16 / 2015

Transaction ID : D580514

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

814.35

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 17 / 2015

Transaction ID : D580550

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 13 / 2015

Transaction ID : D580345

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : D580497

Amount of Each Disbursement this Period

135.73

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

678.63

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

Transaction ID : D580477

Amount of Each Disbursement this Period

135.73

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Harris County AFL-CIO Council

Mailing Address 2505 Sutherland

City Houston State TX Zip Code 77023

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : D581392

Amount of Each Disbursement this Period

271.45

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. International Brotherhood of Electrical Workers Local 654 General Fund

Mailing Address 3729 Chichester Ave.

City Boothwyn State PA Zip Code 19061

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 19 / 2015

Transaction ID : D580587

Amount of Each Disbursement this Period

670.08

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

1077.26

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. JCAESP/AFSCME Local 4011 General Fund

Mailing Address 4315 Preston Highway
Suite 101

City Louisville State KY Zip Code 40213

Purpose of Disbursement
Non Federal Inkind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581104

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Lemmon Tree Consulting

Mailing Address 137 Edward Drive

City Millersburg State PA Zip Code 17061

Purpose of Disbursement
Non Federal Media Consulting Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580288

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Lemmon Tree Consulting

Mailing Address 137 Edward Drive

City Millersburg State PA Zip Code 17061

Purpose of Disbursement
Non Federal Media Consulting Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D584385

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Lexicon

Mailing Address 10300 Farnham Drive

City State Zip Code
Bethesda MD 20814

Purpose of Disbursement
Non Federal Printing

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D584383

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Lexicon

Mailing Address 10300 Farnham Drive

City State Zip Code
Bethesda MD 20814

Purpose of Disbursement
Non Federal Printing

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579116

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Lexicon

Mailing Address 10300 Farnham Drive

City State Zip Code
Bethesda MD 20814

Purpose of Disbursement
Non Federal Flier Design

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D576038

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Mosaic

Mailing Address 4801 Viewpoint Place

City State Zip Code
Cheverly MD 20781

Purpose of Disbursement
Non Federal Fliers

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2015

Transaction ID : D576037

Amount of Each Disbursement this Period

2183.39

Memo Item

Full Name (Last, First, Middle Initial)

B. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City State Zip Code
Scranton PA 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 13 / 2015

Transaction ID : D580354

Amount of Each Disbursement this Period

257.94

Memo Item

* In-Kind

Full Name (Last, First, Middle Initial)

C. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City State Zip Code
Scranton PA 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2015

Transaction ID : D580472

Amount of Each Disbursement this Period

257.94

Memo Item

* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

2699.27

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2015

Transaction ID : D580493

Amount of Each Disbursement this Period

257.94

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2015

Transaction ID : D580510

Amount of Each Disbursement this Period

257.94

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2015

Transaction ID : D580563

Amount of Each Disbursement this Period

128.97

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

644.85

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City State Zip Code
Scranton PA 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2015

Transaction ID : D580591

Amount of Each Disbursement this Period

257.94

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City State Zip Code
Scranton PA 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 12 / 2015

Transaction ID : D580287

Amount of Each Disbursement this Period

257.94

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City State Zip Code
Scranton PA 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2015

Transaction ID : D580059

Amount of Each Disbursement this Period

257.94

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

773.82

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2015

Transaction ID : D581127

Amount of Each Disbursement this Period

257.94

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : D581101

Amount of Each Disbursement this Period

257.94

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 25 / 2015

Transaction ID : D580979

Amount of Each Disbursement this Period

257.94

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

773.82

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City State Zip Code
Scranton PA 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2015

Transaction ID : D581066

Amount of Each Disbursement this Period

257.94

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City State Zip Code
Scranton PA 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2015

Transaction ID : D580837

Amount of Each Disbursement this Period

257.94

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City State Zip Code
Scranton PA 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : D580641

Amount of Each Disbursement this Period

257.94

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

773.82

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	2			2	0	1	5		

Transaction ID : D580887

Amount of Each Disbursement this Period

2	5	7	.	9	4
---	---	---	---	---	---

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	3			2	0	1	5		

Transaction ID : D580915

Amount of Each Disbursement this Period

2	5	7	.	9	4
---	---	---	---	---	---

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	5		

Transaction ID : D580961

Amount of Each Disbursement this Period

1	2	8	.	8	5
---	---	---	---	---	---

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

6	4	4	.	8	5
---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

6	4	4	.	8	5
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2015

Transaction ID : D581409

Amount of Each Disbursement this Period

257.94

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal Inkind Staff-PA

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2015

Transaction ID : D581346

Amount of Each Disbursement this Period

42.96

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2015

Transaction ID : D581347

Amount of Each Disbursement this Period

64.48

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

365.38

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2015

Transaction ID : D581273

Amount of Each Disbursement this Period

257.94

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal Inkind Staff-PA

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2015

Transaction ID : D581156

Amount of Each Disbursement this Period

128.97

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Northeast Pennsylvania Area Labor Federation General Fund

Mailing Address 1258 O'Neill Hwy

City Scranton State PA Zip Code 18512

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2015

Transaction ID : D581157

Amount of Each Disbursement this Period

128.97

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

515.88

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2015

Transaction ID : D581159

Amount of Each Disbursement this Period

461.12

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Non Federal Inkind Staff-PA

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2015

Transaction ID : D581198

Amount of Each Disbursement this Period

109.55

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2015

Transaction ID : D581275

Amount of Each Disbursement this Period

242.00

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

812.67

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Non Federal Inkind Staff-PA

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2015			

Transaction ID : D581411

Amount of Each Disbursement this Period

109.55

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2015			

Transaction ID : D581412

Amount of Each Disbursement this Period

109.56

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2015			

Transaction ID : D580917

Amount of Each Disbursement this Period

461.12

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

680.23

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2015

Transaction ID : D580889

Amount of Each Disbursement this Period

461.12

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2015

Transaction ID : D580963

Amount of Each Disbursement this Period

230.56

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Non Federal Inkind Staff-PA

001

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2015

Transaction ID : D580964

Amount of Each Disbursement this Period

230.55

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

922.23

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D581103

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D581068

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Northwestern PA Area Labor Federation

Mailing Address 1276 Liberty Street

City Franklin State PA Zip Code 16323

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D581129

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Colleen M. O'Neill-Yanchulis

Mailing Address 283 College Manor Drive

City State Zip Code
Arnold MD 21012

Purpose of Disbursement
Media Production - Non Federal Fliers

004

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 05 / 2015

Transaction ID : D584369

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City State Zip Code
Columbus OH 43215

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2015

Transaction ID : D581326

Amount of Each Disbursement this Period

111.54

Memo Item

* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City State Zip Code
Columbus OH 43215

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2015

Transaction ID : D581388

Amount of Each Disbursement this Period

111.54

Memo Item

* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

323.08

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D581244

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D581141

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D581111

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581084

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580969

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D581044

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580900

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580945

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580817

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D580639

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D580874

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D580274

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579913

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580045

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580333

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D579711

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D579691

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D579731

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579758

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579781

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580590

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D580562

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D580509

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D580492

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D580471

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578861

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578884

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578885

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578965

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D578924

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D578925

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D578926

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D578979

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579016

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579046

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579114

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D579132

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D579140

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D579173

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2015

Transaction ID : D579152

Amount of Each Disbursement this Period

111.54

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2015

Transaction ID : D579275

Amount of Each Disbursement this Period

111.54

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

001

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2015

Transaction ID : D579251

Amount of Each Disbursement this Period

111.54

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

334.62

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579332

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579625

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : D579591

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D579659

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D579312

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Ohio AFL-CIO General Fund

Mailing Address c/o Secretary Petee Talley
395 E. Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D579321

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D580466

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D580353

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D580500

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

986.61

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Transaction ID : D580586

Amount of Each Disbursement this Period

328.87

Memo Item
* In-Kind

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Transaction ID : D580517

Amount of Each Disbursement this Period

328.87

Memo Item
* In-Kind

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Transaction ID : D580556

Amount of Each Disbursement this Period

328.87

Memo Item
* In-Kind

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

986.61

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D580286

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Memo Item
* In-Kind

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D580058

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Memo Item
* In-Kind

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D580836

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Memo Item
* In-Kind

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

986.61

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Philadelphia AFL-CIO Council General Fund

Mailing Address c/o Pat Eiding
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **D580649**

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Philadelphia AFL-CIO Council General Fund

Mailing Address c/o Pat Eiding
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **D580960**

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Philadelphia AFL-CIO Council General Fund

Mailing Address c/o Pat Eiding
22 S 22nd Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
Non Federal In Kind Staff

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **D580886**

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D580914

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D580978

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D581065

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

986.61

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D581100

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D581126

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D581155

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

986.61

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D581345

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D581272

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. Philadelphia AFL-CIO Council General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2015

Mailing Address c/o Pat Eiding
22 S 22nd Street

Transaction ID : D581408

City Philadelphia State PA Zip Code 19103

Amount of Each Disbursement this Period

328.87

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

986.61

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Texas Votes

Mailing Address 201 E Ben White Blvd Bldg B, Suite

City State Zip Code
Austin TX 78704

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D584664

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. SEIU PA State Council General Fund

Mailing Address 1500 N. Second Street
Suite 11

City State Zip Code
Harrisburg PA 17102

Purpose of Disbursement
In Kind Non Federal Staff

Category/
Type

Candidate Name

SEIU PA State Council

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D582271

Amount of Each Disbursement this Period

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. Southeastern Pennsylvania Area Labor Federation General Fund

Mailing Address 1000 Germantown Pike Road
Building K5

City State Zip Code
Plymouth Meeting PA 19462

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : D581410

Amount of Each Disbursement this Period

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	5

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Non Federal In Kind Staff

001

Transaction ID : D581274

Amount of Each Disbursement this Period

2	8	7	.	4	3
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Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item
* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

B. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	5

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Non Federal In Kind Staff

001

Transaction ID : D581348

Amount of Each Disbursement this Period

2	8	7	.	4	3
---	---	---	---	---	---

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item
* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

C. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	1	5

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Non Federal In Kind Staff

001

Transaction ID : D581158

Amount of Each Disbursement this Period

2	8	7	.	4	3
---	---	---	---	---	---

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item
* In-Kind

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8	6	2	.	2	9
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	9			2	0	1	5		

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Transaction ID : D581128

Amount of Each Disbursement this Period

2	8	7	.	4	3
---	---	---	---	---	---

Memo Item
* In-Kind

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	5		

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Transaction ID : D581102

Amount of Each Disbursement this Period

2	8	7	.	4	3
---	---	---	---	---	---

Memo Item
* In-Kind

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	5		

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Transaction ID : D581067

Amount of Each Disbursement this Period

2	8	7	.	4	3
---	---	---	---	---	---

Memo Item
* In-Kind

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8	6	2	.	9
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2015

Mailing Address 1000 Germantown Pike Road
Building K5

Transaction ID : D580888

City Plymouth Meeting State PA Zip Code 19462

Amount of Each Disbursement this Period

287.43

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2015

Mailing Address 1000 Germantown Pike Road
Building K5

Transaction ID : D580962

City Plymouth Meeting State PA Zip Code 19462

Amount of Each Disbursement this Period

287.43

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2015

Mailing Address 1000 Germantown Pike Road
Building K5

Transaction ID : D580916

City Plymouth Meeting State PA Zip Code 19462

Amount of Each Disbursement this Period

287.43

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

862.29

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	1	5

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Non Federal In Kind Staff

001

Transaction ID : D580646

Amount of Each Disbursement this Period

2	8	7	.	4	3
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Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item
* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

B. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	1	5

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Non Federal In Kind Staff

001

Transaction ID : D580838

Amount of Each Disbursement this Period

2	8	7	.	4	3
---	---	---	---	---	---

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item
* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

C. Southeastern Pennsylvania Area Labor Federation General Fund

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	1	5

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Non Federal In Kind Staff

001

Transaction ID : D580553

Amount of Each Disbursement this Period

2	8	7	.	4	3
---	---	---	---	---	---

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item
* In-Kind

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8	6	2	.	2	9
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. Southeastern Pennsylvania Area Labor Federation General Fund

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2015

Transaction ID : D580515

Amount of Each Disbursement this Period

287.43

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. Southeastern Pennsylvania Area Labor Federation General Fund

Mailing Address 1000 Germantown Pike Road
Building K5

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Non Federal In Kind Staff

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2015

Transaction ID : D580583

Amount of Each Disbursement this Period

287.43

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. The Pivot Group

Mailing Address 1720 I St NW
Ste 550

City Washington State DC Zip Code 20006

Purpose of Disbursement
Non Federal Fliers

004

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2015

Transaction ID : D581117

Amount of Each Disbursement this Period

5150.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

5724.86

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D581121

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

8	4	7	.	0	3
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D581122

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D581063

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1	1	8	5	.	4	9
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D581096

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

6	6	7	.	8	7
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D581097

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D580975

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

1	0	0	6	.	3	3
---	---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

1	0	0	6	.	3	3
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	2			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D580883

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

3	5	3	.	7	4
---	---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	2			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D580884

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D580832

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

3	0	6	.	4	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

8	2	9	.	4	5
---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

8	2	9	.	4	5
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D580833

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D580650

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D580958

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

5	0	7	.	6	9
---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

5	0	7	.	6	9
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0	2		2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D580910

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

6	6	0	.	2	2
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Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0	2		2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D580911

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0	2		2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D581151

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

5	3	2	.	9	0
---	---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

1	3	6	.	2	5
---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

1	3	6	.	2	5
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2015

Mailing Address 1775 K Street, NW

Transaction ID : D581152

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

169.23

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2015

Mailing Address 1775 K Street, NW

Transaction ID : D581197

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1165.95

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2015

Mailing Address 1775 K Street, NW

Transaction ID : D581268

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

169.23

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1504.41

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2015

Mailing Address 1775 K Street, NW

Transaction ID : D581269

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

188.89

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2015

Mailing Address 1775 K Street, NW

Transaction ID : D581403

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

847.03

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2015

Mailing Address 1775 K Street, NW

Transaction ID : D581404

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

169.23

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1205.15

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	5

Mailing Address 1775 K Street, NW

Transaction ID : D581341

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	5

Mailing Address 1775 K Street, NW

Transaction ID : D581342

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

8	4	7	.	0	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	1	5

Mailing Address 1775 K Street, NW

Transaction ID : D580588

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1	1	8	.	5	4	9
---	---	---	---	---	---	---

1	1	8	.	5	4	9
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D580547

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

3	3	.	0	2
---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D580548

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	4	7	.	9	0
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	1	5

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D580557

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

3	5	0	.	1	5
---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

3	5	0	.	1	5
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	6			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D580518

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D580501

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	4			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D580467

Purpose of Disbursement
Non Federal In Kind Staff

Category/
Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

5	0	7	.	6	9
---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

5	0	7	.	6	9
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2015

Mailing Address 1775 K Street, NW

Transaction ID : D580468

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

306.48

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Mailing Address 1775 K Street, NW

Transaction ID : D580054

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

169.23

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Mailing Address 1775 K Street, NW

Transaction ID : D580055

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

127.32

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

603.03

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	6			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D579910

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	6			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D580283

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	6			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D580348

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5	0	7	.	6	9
---	---	---	---	---	---

1	6	9	.	2	3
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	1	5

Mailing Address 1775 K Street, NW

Transaction ID : D580349

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

6	8	2	.	8	4
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Purpose of Disbursement
Non Federal Inkind Staff

0	0	1
Category/Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	5		2	0	1	5

Mailing Address 1775 K Street, NW

Transaction ID : D579777

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	1	5

Mailing Address 1775 K Street, NW

Transaction ID : D579757

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

1	0	2	.	1	3
---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

1	0	2	.	1	3
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2015

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D579737

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

169.23

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D579662

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

169.23

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2015

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D579689

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

169.23

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

507.69

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

Mailing Address 1775 K Street, NW

Transaction ID : D579715

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

169.23

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2015

Mailing Address 1775 K Street, NW

Transaction ID : D579330

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

169.23

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2015

Mailing Address 1775 K Street, NW

Transaction ID : D579318

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

353.74

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

692.20

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	4				2	0	1	5

Mailing Address 1775 K Street, NW

Transaction ID : D579319

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
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Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	3				2	0	1	5

Mailing Address 1775 K Street, NW

Transaction ID : D579314

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

3	0	6	.	4	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	3				2	0	1	5

Mailing Address 1775 K Street, NW

Transaction ID : D579310

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

6	4	4	.	9	4
---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

6	4	4	.	9	4
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2015

Mailing Address 1775 K Street, NW

Transaction ID : D579279

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

567.96

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2015

Mailing Address 1775 K Street, NW

Transaction ID : D579280

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

169.23

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2015

Mailing Address 1775 K Street, NW

Transaction ID : D579627

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

169.23

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

906.42

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2015

Mailing Address 1775 K Street, NW

Transaction ID : D579334

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

353.74

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2015

Mailing Address 1775 K Street, NW

Transaction ID : D579589

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

169.23

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2015

Mailing Address 1775 K Street, NW

Transaction ID : D579248

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

169.23

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

692.20

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D579176

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
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Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D579177

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

9	2	1	.	7	0
---	---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff

0	0	1
Category/Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D579143

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	7	6	.	8	8
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1	2	6	.	7	8	1
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D579144

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	7	6	.	8	8
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	8			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D579160

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	8			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D579161

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	7	6	.	8	8
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

5	2	2	.	9	9
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TOTAL This Period (last page this line number only)..... ▶

5	2	2	.	9	9
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D579138

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D579115

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

7	0	.	0	1
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Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D579129

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4	0	8	.	4	7
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D579130

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

3	0	6	.	4	8
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Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D579110

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

7	0	.	0	1
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Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D579112

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	6	9	.	2	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

5	4	5	.	7	2
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TOTAL This Period (last page this line number only)..... ▶

5	4	5	.	7	2
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	4			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D579043

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

2	8	0	.	7	7
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Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	3			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D579017

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

2	8	0	.	7	7
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	1			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D578969

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

2	8	0	.	7	7
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8	4	2	.	3	1
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	1		2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D578970

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

6	1	.	7	1
---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	1		2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D578971

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

3	0	.	8	5
---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff

0	0	1
Category/Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	2		2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D578976

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

2	8	0	.	7	7
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3	7	3	.	3	3
---	---	---	---	---	---

3	7	3	.	3	3
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D578977

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	4	1	.	3	7
---	---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	0			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D578934

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

2	8	0	.	7	7
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	5		

Mailing Address 1775 K Street, NW

Transaction ID : D578935

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

2	8	0	.	7	7
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

7	0	2	.	9	1
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TOTAL This Period (last page this line number only)..... ▶

7	0	2	.	9	1
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2015

Mailing Address 1775 K Street, NW

Transaction ID : D578936

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

280.77

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2015

Mailing Address 1775 K Street, NW

Transaction ID : D578937

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

89.27

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2015

Mailing Address 1775 K Street, NW

Transaction ID : D578938

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

43.13

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

SUBTOTAL of Disbursements This Page (optional)..... ▶

413.17

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	0		2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D578939

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	7	8	.	5	3
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				0	9		2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D578940

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

1	7	8	.	5	3
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				0	8		2	0	1	5		

Mailing Address 1775 K Street, NW

City Washington State DC Zip Code 20006-1598

Transaction ID : D578858

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Amount of Each Disbursement this Period

2	8	0	.	7	7
---	---	---	---	---	---

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

6	3	7	.	8	3
---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

6	3	7	.	8	3
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2015

Mailing Address 1775 K Street, NW

Transaction ID : D578892

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

280.77

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2015

Mailing Address 1775 K Street, NW

Transaction ID : D578893

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

280.77

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2015

Mailing Address 1775 K Street, NW

Transaction ID : D578894

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

89.27

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

650.81

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. UFCW Int'l Union Working Families Advocacy Project

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	5

Mailing Address 1775 K Street, NW

Transaction ID : D578895

City Washington State DC Zip Code 20006-1598

Amount of Each Disbursement this Period

1	7	8	.	5	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	5		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D579778

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

6	7	8	.	1	5
---	---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D580344

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

5	8	3	.	9	5
---	---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

SUBTOTAL of Disbursements This Page (optional)..... ▶

1	4	4	.	0	3
---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

1	4	4	.	0	3
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D580048

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

1	8	8	0	4	0
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	2		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D580279

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

9	1	0	3	0
---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D580474

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

3	2	6	3	5
---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1	4	2	5	0	5
---	---	---	---	---	---

1	4	2	5	0	5
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	4			2	0	1	5		

Mailing Address 80 F STREET NW

Transaction ID : D580465

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

1	7	9	.	5	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	5		

Mailing Address 80 F STREET NW

Transaction ID : D580499

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

1	7	9	.	5	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	5		

Mailing Address 80 F STREET NW

Transaction ID : D580554

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

1	7	9	.	5	4
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

5	3	8	.	6	0
---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

5	3	8	.	6	0
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2015

Mailing Address 80 F STREET NW

Transaction ID : D580516

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

179.53

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		19		2015

Mailing Address 80 F STREET NW

Transaction ID : D580585

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

269.30

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2015

Mailing Address 80 F STREET NW

Transaction ID : D580560

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

179.52

Purpose of Disbursement
Non Federal Inkind Staff-PA

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

628.35

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D581328

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

3	2	6	.	3	5
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
---	---	---

Category/
Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D581329

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

1	7	9	.	5	4
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
---	---	---

Category/
Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D581389

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

2	6	9	.	3	0
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
---	---	---

Category/
Type

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7	7	5	.	1	9
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D581391

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

3	2	6	.	3	5
---	---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff

0	0	1
Category/ Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D581245

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

1	7	9	.	5	3
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/ Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D581192

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

8	9	.	7	6
---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff-PA

0	0	1
Category/ Type		

Candidate Name

Memo Item
* In-Kind

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5	9	5	.	6	4
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

Mailing Address 80 F STREET NW

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2015			

City WASHINGTON State DC Zip Code 20001

Transaction ID : D580901

Purpose of Disbursement
Non Federal Inkind Staff-PA

001

Amount of Each Disbursement this Period

Candidate Name

89.76

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item
* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

Mailing Address 80 F STREET NW

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2015			

City WASHINGTON State DC Zip Code 20001

Transaction ID : D580902

Purpose of Disbursement
Non Federal Inkind Staff

001

Amount of Each Disbursement this Period

Candidate Name

163.17

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item
* In-Kind

State: District:

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

Mailing Address 80 F STREET NW

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2015			

City WASHINGTON State DC Zip Code 20001

Transaction ID : D580903

Purpose of Disbursement
Non Federal In Kind Staff

001

Amount of Each Disbursement this Period

Candidate Name

269.30

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item
* In-Kind

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

522.23

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2015

Mailing Address 80 F STREET NW

Transaction ID : D580950

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

89.76

Purpose of Disbursement
Non Federal Inkind Staff-PA

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2015

Mailing Address 80 F STREET NW

Transaction ID : D580951

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

89.77

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2015

Mailing Address 80 F STREET NW

Transaction ID : D580823

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

326.35

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

505.88

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	5		

Mailing Address 80 F STREET NW

Transaction ID : D580824

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

8	9	7	7
---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	5		

Mailing Address 80 F STREET NW

Transaction ID : D580825

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

2	3	9	3	7
---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff-PA

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	5		

Mailing Address 80 F STREET NW

Transaction ID : D580648

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

2	6	9	3	0
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Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

5	9	8	4	4
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TOTAL This Period (last page this line number only)..... ▶

5	9	8	4	4
---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

Mailing Address 80 F STREET NW

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		2	0		2	0	1	5		

City WASHINGTON State DC Zip Code 20001

Transaction ID : D580640

Purpose of Disbursement
Non Federal Inkind Staff-PA

001
Category/ Type

Amount of Each Disbursement this Period

89.76

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

Mailing Address 80 F STREET NW

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	9		2	0	1	5		

City WASHINGTON State DC Zip Code 20001

Transaction ID : D580593

Purpose of Disbursement
Non Federal Inkind Staff-PA

001
Category/ Type

Amount of Each Disbursement this Period

89.76

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

Mailing Address 80 F STREET NW

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		2	2		2	0	1	5		

City WASHINGTON State DC Zip Code 20001

Transaction ID : D580875

Purpose of Disbursement
Non Federal Inkind Staff-PA

001
Category/ Type

Amount of Each Disbursement this Period

179.52

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item
* In-Kind

SUBTOTAL of Disbursements This Page (optional)..... ▶

359.04

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D580876

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

1	7	9	.	5	4
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Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/ Type		

Candidate Name

Memo Item
* In-Kind

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D580970

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

3	2	6	.	3	5
---	---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/ Type		

Candidate Name

Memo Item
* In-Kind

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D581056

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

8	9	.	7	7
---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

0	0	1
Category/ Type		

Candidate Name

Memo Item
* In-Kind

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5	9	5	.	6	6
---	---	---	---	---	---

5	9	5	.	6	6
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Workers' Voice

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2015			

Mailing Address 80 F STREET NW

Transaction ID : D581057

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

89.76

Purpose of Disbursement
Non Federal Inkind Staff-PA

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2015			

Mailing Address 80 F STREET NW

Transaction ID : D581112

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

359.06

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2015			

Mailing Address 80 F STREET NW

Transaction ID : D581142

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

326.35

Purpose of Disbursement
Non Federal Inkind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

775.17

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Workers' Voice

Full Name (Last, First, Middle Initial)

A. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D581143

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

3	5	9	.	0	6
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Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D581086

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

8	9	.	7	6
---	---	---	---	---

Purpose of Disbursement
Non Federal Inkind Staff-PA

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. VOICES OF THE AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	1	5

Mailing Address 80 F STREET NW

Transaction ID : D581087

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

8	9	.	7	7
---	---	---	---	---

Purpose of Disbursement
Non Federal In Kind Staff

001
Category/ Type

Candidate Name

Memo Item
* In-Kind

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

5	3	8	.	5	9
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TOTAL This Period (last page this line number only)..... ▶

2	6	7	3	4	3	3	.	0	1
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SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 233 OF 233
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Workers' Voice

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AFL-CIO	Nature of Debt (Purpose): Reimbursement for Internet Costs
Mailing Address 815 - 16th Street, NW	
City State Zip Code Washington DC 20006	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D569795	
Amount Incurred This Period 217.86	Payment This Period 0.00	Outstanding Balance at Close of This Period 217.86

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor AFL-CIO	Nature of Debt (Purpose): Non Federal Walk Packets
Mailing Address 815 - 16th Street, NW	
City State Zip Code Washington DC 20006	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D580513	
Amount Incurred This Period 169.65	Payment This Period 0.00	Outstanding Balance at Close of This Period 169.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mosaic	Nature of Debt (Purpose): Non Federal Fliers
Mailing Address 4801 Viewpoint Place	
City State Zip Code Cheverly MD 20781	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D578857	
Amount Incurred This Period 54635.83	Payment This Period 0.00	Outstanding Balance at Close of This Period 54635.83

1) SUBTOTALS This Period This Page (optional)..... ▶	55023.34
2) TOTALS This Period (last page this line number only)..... ▶	55023.34
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	55023.34