

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Office and Professional Employees International Union - Voice of the Electorate

ADDRESS (number and street)

1660 L STREET, NW

SUITE 801

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20036

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00007898

3. IS THIS  
REPORT☒NEW  
(N)**OR**☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☒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 (12G)

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

01

01

2007

through

06

30

2007

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

Nancy Wohlforth

Signature of Treasurer

Electronically Filed by Nancy Wohlforth

Date

07

30

2007

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

|                       |  |  |  |  |  |  |  |
|-----------------------|--|--|--|--|--|--|--|
| Office<br>Use<br>Only |  |  |  |  |  |  |  |
|-----------------------|--|--|--|--|--|--|--|

**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Office and Professional Employees International Union - Voice of the Electorate

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 1 | 0 | 1 | 2 | 0 | 0 | 7 |

To:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 6 | 3 | 0 | 2 | 0 | 0 | 7 |

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1 <span>2007</span>                                                               |                         | 327657.33                         |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....                                                       | 302504.35               |                                   |
| (c) Total Receipts (from Line 19) .....                                                                          | 76726.24                | 76726.24                          |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....             | 379230.59               | 404383.57                         |
| 7. Total Disbursements (from Line 31) .....                                                                      | 17550.00                | 17550.00                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 361680.59               | 386833.57                         |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |

☐ 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. 02/2003)

Page 3

Write or Type Committee Name

Office and Professional Employees International Union - Voice of the Electorate

Report Covering the Period:

From:

M M  
0 1D D  
0 1Y Y Y Y  
2 0 0 7

To:

M M  
0 6D D  
3 0Y Y Y Y  
2 0 0 7

| I. Receipts                                                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:                                                             |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees                                                | 34164.49                      | 131032.75                         |
| (i) Itemized (use Schedule A) .....                                                                    | 40910.23                      | 149577.13                         |
| (ii) Unitemized .....                                                                                  | 75074.72                      | 75074.72                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....                                                         | 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 Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....    | 75074.72                      | 75074.72                          |
| 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) ..... | 1000.00                       | 1000.00                           |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....                                           | 651.52                        | 651.52                            |
| 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 Transfer (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)) .....                          | 76726.24                      | 76726.24                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 76726.24                      | 76726.24                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. DISBURSEMENTS                                                                               | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|-------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:                                                                     |                               |                                   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                      | 0.00                          | 0.00                              |
| (i) Federal Share.....                                                                          |                               |                                   |
| (ii) Non-Federal Share.....                                                                     | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures.....                                                   | 3050.00                       | 3050.00                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡                         | 3050.00                       | 3050.00                           |
| 22. Transfers to Affiliated/Other Party Committees.....                                         | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....          | 11500.00                      | 11500.00                          |
| 24. Independent Expenditure (use Schedule E) .....                                              | 0.00                          | 0.00                              |
| 25. Coordinated Expenditures Made by Party Committees (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.....                                                                    | 3000.00                       | 3000.00                           |
| 30. Federal Election Activity (2 U.S.C 431(20))                                                 |                               |                                   |
| (a) Shared 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))..        | 17550.00                      | 17550.00                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 17550.00                      | 17550.00                          |

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 5

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|-------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 75074.72                      | 75074.72                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 75074.72                      | 75074.72                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 3050.00                       | 3050.00                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 1000.00                       | 1000.00                           |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 2050.00                       | 2050.00                           |

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

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

FOR LINE NUMBER: PAGE 6 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** John R Akers

Mailing Address 712 S HWS Cleveland Blvd

City State Zip Code  
 Elkhorn NE 68022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C92190

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B.** Richard Altig, Jr

Mailing Address 13911 49TH AVENUE CT NW

City State Zip Code  
 GIG HARBOR WA 98332

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1242.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C92200

Amount of Each Receipt this Period

1242.00

Full Name (Last, First, Middle Initial)

**C.** RICK ALTIG Jr

Mailing Address 10025 111th AVE NE

City State Zip Code  
 KIRKLAND WA 98033

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C92201

Amount of Each Receipt this Period

1248.00

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

2790.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

A. Yaroslav Bitman

Mailing Address 223 WATERFORD PARK LN

City State Zip Code  
**RALEIGH NC 27615**

FEC ID number of contributing federal political committee.

**C**Name of Employer  
American Income LifeOccupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

M M / D D / Y Y Y Y  
**0 2 / 2 6 / 2 0 0 7**

Transaction ID: C92272

Amount of Each Receipt this Period

**300.00**

Full Name (Last, First, Middle Initial)

B. Gary Bleier

Mailing Address 917A WINDFIELD PL

City State Zip Code  
**APPLETON WI 54911**

FEC ID number of contributing federal political committee.

**C**Name of Employer  
American Income LifeOccupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

M M / D D / Y Y Y Y  
**0 2 / 2 6 / 2 0 0 7**

Transaction ID: C92281

Amount of Each Receipt this Period

**300.00**

Full Name (Last, First, Middle Initial)

C. Ronald Byers

Mailing Address 41 S Hawthorne Ln

City State Zip Code  
**Indianapolis IN 46219-6309**

FEC ID number of contributing federal political committee.

**C**Name of Employer  
L-1 GREATER MARION COUNTY

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**222.00**

Date of Receipt

M M / D D / Y Y Y Y  
**0 4 / 3 0 / 2 0 0 7**

Transaction ID: C98581

Amount of Each Receipt this Period

**157.50**

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

**757.50**

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 32

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Ronald Byers<br>Mailing Address 41 S Hawthorne Ln<br>City State Zip Code<br>Indianapolis IN 46219-6309<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>L-1 GREATER MARION COUNTY<br>Occupation<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>222.00                      |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 3 0 / 2 0 0 7<br><b>Transaction ID: C98580</b><br>Amount of Each Receipt this Period<br>64.50   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>David Cohen<br>Mailing Address 140 N LAS PALMOS<br>City State Zip Code<br>Los Angeles CA 90004<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>American Income Life<br>Occupation<br>Insurance Agent<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>1200.00               |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7<br><b>Transaction ID: C92364</b><br>Amount of Each Receipt this Period<br>1200.00 |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>TYRONE ALLEN CONARD<br>Mailing Address 15581 ANDOVER HEIGHTS DR<br>City State Zip Code<br>WOODBRIDGE VA 22193<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>American Income Life<br>Occupation<br>Insurance Agent<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>300.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7<br><b>Transaction ID: C92370</b><br>Amount of Each Receipt this Period<br>300.00  |

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

1564.50

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

|                                                                                                                                 |  |                                     |                                                                 |  |
|---------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------|-----------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Demario M Cooper                                                           |  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |  |
| Mailing Address 724 Royal Anne Ln<br>#105                                                                                       |  |                                     | <b>Transaction ID:</b> C93518                                   |  |
| City State Zip Code<br>Raleigh NC 27615                                                                                         |  |                                     | Amount of Each Receipt this Period<br>1200.00                   |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |  |                                     |                                                                 |  |
| Name of Employer<br>American Income Life                                                                                        |  | Occupation<br>Agent                 |                                                                 |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1200.00 |                                                                 |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Eddie S Dhillon                                                            |  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |  |
| Mailing Address 7740 HERITAGE DR<br>#11                                                                                         |  |                                     | <b>Transaction ID:</b> C93551                                   |  |
| City State Zip Code<br>Lansing MI 48917                                                                                         |  |                                     | Amount of Each Receipt this Period<br>300.00                    |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |  |                                     |                                                                 |  |
| Name of Employer<br>American Income Life                                                                                        |  | Occupation<br>Agent                 |                                                                 |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>300.00  |                                                                 |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Jose Diecedue, III                                                         |  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |  |
| Mailing Address 7712 JEFFERSON PL BLVD APTC                                                                                     |  |                                     | <b>Transaction ID:</b> C92431                                   |  |
| City State Zip Code<br>BATON ROUGE LA 70809                                                                                     |  |                                     | Amount of Each Receipt this Period<br>300.00                    |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |  |                                     |                                                                 |  |
| Name of Employer<br>American Income Life                                                                                        |  | Occupation<br>Agent                 |                                                                 |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>300.00  |                                                                 |  |

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

1800.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

|                                                                                                                                 |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mary Dunn                                                                  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 1 / 3 0 / 2 0 0 7 |  |
| Mailing Address 9333 SW 22 st                                                                                                   |                                    | <b>Transaction ID:</b> C89690                                 |  |
| City<br>Oklahoma City                                                                                                           | State<br>OK                        | Zip Code<br>73128                                             |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                    | Amount of Each Receipt this Period<br>20.00                   |  |
| Name of Employer<br>International Union UAW                                                                                     | Occupation                         |                                                               |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>240.00 |                                                               |  |

|                                                                                                                                 |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mary Dunn                                                                  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 2 / 2 7 / 2 0 0 7 |  |
| Mailing Address 9333 SW 22 st                                                                                                   |                                    | <b>Transaction ID:</b> C92060                                 |  |
| City<br>Oklahoma City                                                                                                           | State<br>OK                        | Zip Code<br>73128                                             |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                    | Amount of Each Receipt this Period<br>40.00                   |  |
| Name of Employer<br>International Union UAW                                                                                     | Occupation                         |                                                               |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>240.00 |                                                               |  |

|                                                                                                                                 |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mary Dunn                                                                  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 3 / 2 7 / 2 0 0 7 |  |
| Mailing Address 9333 SW 22 st                                                                                                   |                                    | <b>Transaction ID:</b> C98226                                 |  |
| City<br>Oklahoma City                                                                                                           | State<br>OK                        | Zip Code<br>73128                                             |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                    | Amount of Each Receipt this Period<br>40.00                   |  |
| Name of Employer<br>International Union UAW                                                                                     | Occupation                         |                                                               |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>240.00 |                                                               |  |

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

100.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 32

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

|                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mary Dunn<br>Mailing Address 9333 SW 22 st<br>City State Zip Code<br>Oklahoma City OK 73128<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer International Union UAW Occupation<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>240.00 |  | Date of Receipt<br>MM / DD / YYYY<br>05 / 04 / 2007<br><b>Transaction ID: C100747</b><br>Amount of Each Receipt this Period<br>40.00 |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mary Dunn<br>Mailing Address 9333 SW 22 st<br>City State Zip Code<br>Oklahoma City OK 73128<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer International Union UAW Occupation<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>240.00 |  | Date of Receipt<br>MM / DD / YYYY<br>05 / 17 / 2007<br><b>Transaction ID: C101091</b><br>Amount of Each Receipt this Period<br>40.00 |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mary Dunn<br>Mailing Address 9333 SW 22 st<br>City State Zip Code<br>Oklahoma City OK 73128<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer International Union UAW Occupation<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>240.00 |  | Date of Receipt<br>MM / DD / YYYY<br>06 / 05 / 2007<br><b>Transaction ID: C103328</b><br>Amount of Each Receipt this Period<br>20.00 |

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

100.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

|                                                                                                                                 |                                    |                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mary Dunn                                                                  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 6 / 2 1 / 2 0 0 7 |
| Mailing Address 9333 SW 22 st                                                                                                   |                                    | <b>Transaction ID:</b> C106002                                  |
| City<br>Oklahoma City                                                                                                           | State<br>OK                        | Zip Code<br>73128                                               |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                    | Amount of Each Receipt this Period<br>40.00                     |
| Name of Employer<br>International Union UAW                                                                                     | Occupation                         |                                                                 |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>240.00 |                                                                 |

|                                                                                                                                 |                                    |                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>ROLAND FLETCHER                                                            |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |
| Mailing Address 2500 THOMAS DR<br>#1423                                                                                         |                                    | <b>Transaction ID:</b> C92498                                   |
| City<br>EDMOND                                                                                                                  | State<br>OK                        | Zip Code<br>73003                                               |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                    | Amount of Each Receipt this Period<br>300.00                    |
| Name of Employer<br>American Income Life                                                                                        | Occupation<br>Insurance Agent      |                                                                 |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>300.00 |                                                                 |

|                                                                                                                                 |                                    |                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Donald Foti                                                                |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |
| Mailing Address PO BOX 2500                                                                                                     |                                    | <b>Transaction ID:</b> C92509                                   |
| City<br>NAPA                                                                                                                    | State<br>CA                        | Zip Code<br>94558                                               |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                    | Amount of Each Receipt this Period<br>600.00                    |
| Name of Employer<br>American Income Life                                                                                        | Occupation<br>Insurance Agent      |                                                                 |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>600.00 |                                                                 |

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

940.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 32

(check only one)

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

A. Cindy Furer

Mailing Address 374 E Pelican Ct

City State Zip Code  
 Fresno CA 93720-1254

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C92520

Amount of Each Receipt this Period

900.00

Full Name (Last, First, Middle Initial)

B. Larry Geneser

Mailing Address 13515 S PEBBLEBROOK LN

City State Zip Code  
 GREENWOOD MO 64034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C92541

Amount of Each Receipt this Period

1200.00

Full Name (Last, First, Middle Initial)

C. Eric Giglione

Mailing Address 3 PARKWOOD DR

City State Zip Code  
 COLTS NECK NJ 07722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C92552

Amount of Each Receipt this Period

1200.00

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

3300.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 32

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

A. Arthur J GREENE

Mailing Address 1837 SQUIRREL VALLEY DR

City State Zip Code  
 BLOOMFIELD HILLS MI 48304

FEC ID number of contributing federal political committee.

C

Name of Employer  
American Income LifeOccupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C92580

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Steven Greer

Mailing Address PO Box 208

City State Zip Code  
 Waco TX 76703-0208

FEC ID number of contributing federal political committee.

C

Name of Employer  
NATIONAL INCOME LIFEOccupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C92582

Amount of Each Receipt this Period

900.00

Full Name (Last, First, Middle Initial)

C. Ronald Gurney, Jr.

Mailing Address 2360 Forest Hills Dr

City State Zip Code  
 Lake Orion MI 48359

FEC ID number of contributing federal political committee.

C

Name of Employer  
NATIONAL INCOME LIFEOccupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C92588

Amount of Each Receipt this Period

300.00

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

1500.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 15 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

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

Frederick Hadayia Jr

Mailing Address 101 IRON VALLEY DR

City State Zip Code  
 LEBANON PA 17042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C92594

Amount of Each Receipt this Period

900.00

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

Mark Hancock

Mailing Address 12546 WALNUT RIDGE PL

City State Zip Code  
 FISHERS IN 46038

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN INCOME LIFE INS.  
CO.

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C92606

Amount of Each Receipt this Period

900.00

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

Steve Hartman

Mailing Address 3430 N MOUNTAIN RIDGE RD  
 #69

City State Zip Code  
 MESA AZ 85207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN INCOME LIFE INS.

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C92628

Amount of Each Receipt this Period

900.00

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

2700.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

|                                                                                                                                 |                                    |                                                               |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Rob Hay                                                                    |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |
| Mailing Address PO Box 208                                                                                                      |                                    | <b>Transaction ID:</b> C92631                                 |
| City<br>Waco                                                                                                                    | State<br>TX                        | Zip Code<br>76703-0208                                        |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                    | Amount of Each Receipt this Period<br>750.00                  |
| Name of Employer<br>American Income Life                                                                                        | Occupation<br>Insurance Agent      |                                                               |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>750.00 |                                                               |

|                                                                                                                                 |                                    |                                                               |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Robert T Hughes                                                            |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |
| Mailing Address 1429 SENECA PL                                                                                                  |                                    | <b>Transaction ID:</b> C92686                                 |
| City<br>CHARLOTTE                                                                                                               | State<br>NC                        | Zip Code<br>28209                                             |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                    | Amount of Each Receipt this Period<br>300.00                  |
| Name of Employer<br>American Income Life                                                                                        | Occupation<br>Agent                |                                                               |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>300.00 |                                                               |

|                                                                                                                                 |                                    |                                                               |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>JAMES ISIP                                                                 |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |
| Mailing Address 1819 Preuss Rd                                                                                                  |                                    | <b>Transaction ID:</b> C92700                                 |
| City<br>Los Angeles                                                                                                             | State<br>CA                        | Zip Code<br>90035                                             |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                    | Amount of Each Receipt this Period<br>300.00                  |
| Name of Employer<br>American Income Life                                                                                        | Occupation<br>Insurance Agent      |                                                               |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>300.00 |                                                               |

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

1350.00

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

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

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

John Jatoft

Mailing Address 4071 PORT CHICAGO HWY  
Suite 200

City State Zip Code  
CONCORD CA 94520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Transaction ID: C92706

Amount of Each Receipt this Period

600.00

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

William Jennings

Mailing Address 17961 E EUCLID PL

City State Zip Code  
AURORA CO 80016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Transaction ID: C92710

Amount of Each Receipt this Period

600.00

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

STEVEN KING

Mailing Address 24331 FAIRWAY HILLS DR

City State Zip Code  
NOVI MI 48374

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Transaction ID: C92755

Amount of Each Receipt this Period

300.00

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

1500.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** Christopher Q Lafond

Mailing Address 8030 Sherwood Dr

City

Presto

State

PA

Zip Code

15142-1078

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation

Insurance Agent

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Transaction ID: C92770

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B.** Richard Lanigan

Mailing Address 11 Timber Lane

City

Northport

State

NY

Zip Code

11768-2418

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
O.P.E.I.U. LOCAL 153

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

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

Transaction ID: C103508

Amount of Each Receipt this Period

249.99

Full Name (Last, First, Middle Initial)

**C.** SCOTT LATTA

Mailing Address 5603 W 125TH ST

City

OVERLAND PARK

State

KS

Zip Code

66209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation

Insurance Agent

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Transaction ID: C92783

Amount of Each Receipt this Period

300.00

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

1149.99

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

|                                                                                                                                 |             |                                                                 |                                              |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------------|----------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Patricia G Lee                                                             |             | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |                                              |
| Mailing Address 7509 YELLOW WOOD                                                                                                |             | <b>Transaction ID:</b> C93734                                   |                                              |
| City<br>Lansing                                                                                                                 | State<br>MI | Zip Code<br>48917                                               | Amount of Each Receipt this Period<br>300.00 |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                                                 |                                              |
| Name of Employer<br>American Income Life                                                                                        |             | Occupation<br>Agent                                             |                                              |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>300.00                              |                                              |

|                                                                                                                                 |             |                                                                 |                                              |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------------|----------------------------------------------|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Joe Manone                                                                 |             | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |                                              |
| Mailing Address N89 W15883 MAIN ST<br>Suite 101                                                                                 |             | <b>Transaction ID:</b> C92837                                   |                                              |
| City<br>MENOMONEE FALLS                                                                                                         | State<br>WI | Zip Code<br>53051                                               | Amount of Each Receipt this Period<br>900.00 |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                                                 |                                              |
| Name of Employer<br>American Income Life                                                                                        |             | Occupation<br>Insurance Agent                                   |                                              |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>900.00                              |                                              |

|                                                                                                                                 |             |                                                                 |                                               |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------------|-----------------------------------------------|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Marc Morton                                                                |             | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |                                               |
| Mailing Address 2476 POWELL AVE                                                                                                 |             | <b>Transaction ID:</b> C92909                                   |                                               |
| City<br>COLUMBUS                                                                                                                | State<br>OH | Zip Code<br>43209                                               | Amount of Each Receipt this Period<br>1200.00 |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                                                 |                                               |
| Name of Employer<br>American Income Life                                                                                        |             | Occupation<br>Insurance Agent                                   |                                               |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>1200.00                             |                                               |

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

2400.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** Susanne M Munro

Mailing Address 4627 Pine Dr

City State Zip Code  
Holland MI 49423

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Transaction ID: C92921

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B.** Eric J Neal

Mailing Address 209 Lambeth Ln

City State Zip Code  
Saint Louis MO 63125

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Transaction ID: C92938

Amount of Each Receipt this Period

900.00

Full Name (Last, First, Middle Initial)

**C.** DURHON RENAH R OLDHAM

Mailing Address 1995 HARRIS RD

City State Zip Code  
PENFIELD NY 14526

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Transaction ID: C92968

Amount of Each Receipt this Period

1200.00

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

2400.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** ROBERT OLSON, Jr

Mailing Address 26561 W HIGHLAND DR

City State Zip Code  
 CHANNAHON IL 60410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C92974

Amount of Each Receipt this Period

1200.00

Full Name (Last, First, Middle Initial)

**B.** Gleb Ostrovsky

Mailing Address 110 GREENRIDGE DR

City State Zip Code  
 MADISON MS 39110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C92982

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** GREGORY PARTEE

Mailing Address 117 CAHABA RIVER PARK

City State Zip Code  
 BIRMINGHAM AL 35243

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: C93000

Amount of Each Receipt this Period

300.00

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

1800.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

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

Karen Perryman

Mailing Address 6204 E 30th St

City State Zip Code  
 Indianapolis IN 46219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Local 1

Occupation  
President/Business Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.50

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 3 0 / 2 0 0 7

Transaction ID: C98577

Amount of Each Receipt this Period

47.00

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

Karen Perryman

Mailing Address 6204 E 30th St

City State Zip Code  
 Indianapolis IN 46219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Local 1

Occupation  
President/Business Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.50

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 3 0 / 2 0 0 7

Transaction ID: C98578

Amount of Each Receipt this Period

64.50

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

Karen Perryman

Mailing Address 6204 E 30th St

City State Zip Code  
 Indianapolis IN 46219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Local 1

Occupation  
President/Business Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.50

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 3 0 / 2 0 0 7

Transaction ID: C98579

Amount of Each Receipt this Period

153.00

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

264.50

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

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

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

FOR LINE NUMBER: PAGE 23 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

|                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Donald S Robson<br>Mailing Address 313 Champs Elysee Blvd<br>City State Zip Code<br>Lafayette LA 70503-6509<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Local 107 Occupation<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>500.00              |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 2 8 / 2 0 0 7<br><b>Transaction ID: C106173</b><br>Amount of Each Receipt this Period<br>500.00 |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Marc E Rosen<br>Mailing Address 96 Rivington Ave<br>City State Zip Code<br>Staten Island NY 10314<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer National Income Life Occupation Agent<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>900.00       |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7<br><b>Transaction ID: C93887</b><br>Amount of Each Receipt this Period<br>900.00  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Paul D Rumbuc<br>Mailing Address 3570 MAGNOLOIA CT<br>City State Zip Code<br>OAKLAND TOWNSHIP MI 48363<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer American Income Life Occupation Agent<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>1200.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7<br><b>Transaction ID: C93120</b><br>Amount of Each Receipt this Period<br>1200.00 |

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

2600.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

|                                                                                                                                 |                                    |                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Imran Satti                                                                |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |
| Mailing Address PO Box 208                                                                                                      |                                    | <b>Transaction ID:</b> C93905                                   |
| City<br>Waco                                                                                                                    | State<br>TX                        | Zip Code<br>76703-0208                                          |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                    | Amount of Each Receipt this Period<br>900.00                    |
| Name of Employer<br>American Income Life                                                                                        | Occupation<br>Agent                |                                                                 |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>900.00 |                                                                 |

|                                                                                                                                 |                                     |                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>James Surace                                                               |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |
| Mailing Address PO BOX 33160                                                                                                    |                                     | <b>Transaction ID:</b> C93236                                   |
| City<br>NORTH ROYALTON                                                                                                          | State<br>OH                         | Zip Code<br>44133                                               |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                     | Amount of Each Receipt this Period<br>1248.00                   |
| Name of Employer<br>American Income Life                                                                                        | Occupation<br>Insurance Agent       |                                                                 |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1248.00 |                                                                 |

|                                                                                                                                 |                                    |                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>RODNEY WARD                                                                |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |
| Mailing Address 18944 EMIT RD                                                                                                   |                                    | <b>Transaction ID:</b> C93325                                   |
| City<br>BROWNSTOWN                                                                                                              | State<br>MI                        | Zip Code<br>48192                                               |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                    | Amount of Each Receipt this Period<br>300.00                    |
| Name of Employer<br>American Income Life                                                                                        | Occupation<br>Insurance Agent      |                                                                 |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>300.00 |                                                                 |

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

2448.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

|                                                                                                                                 |                                    |                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Gary D Williams                                                            |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |
| Mailing Address 531 STILLWATER DR NW                                                                                            |                                    | <b>Transaction ID:</b> C93361                                   |
| City<br>MARIETTA                                                                                                                | State<br>GA                        | Zip Code<br>30064                                               |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                    | Amount of Each Receipt this Period<br>300.00                    |
| Name of Employer<br>American Income Life                                                                                        | Occupation<br>Agent                |                                                                 |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>300.00 |                                                                 |

|                                                                                                                                 |                                     |                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Thomas Williams                                                            |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |
| Mailing Address 10246 SW 22nd PL                                                                                                |                                     | <b>Transaction ID:</b> C93364                                   |
| City<br>DAVIE                                                                                                                   | State<br>FL                         | Zip Code<br>33324                                               |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                     | Amount of Each Receipt this Period<br>1200.00                   |
| Name of Employer<br>American Income Life                                                                                        | Occupation<br>Insurance Agent       |                                                                 |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1200.00 |                                                                 |

|                                                                                                                                 |                                     |                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>David Zophin                                                               |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 6 / 2 0 0 7 |
| Mailing Address 101 GROUSE HILL RD                                                                                              |                                     | <b>Transaction ID:</b> C93413                                   |
| City<br>GLASTONBURY                                                                                                             | State<br>CT                         | Zip Code<br>06033                                               |
| FEC ID number of contributing federal political committee.<br>C                                                                 |                                     | Amount of Each Receipt this Period<br>1200.00                   |
| Name of Employer<br>American Income Life                                                                                        | Occupation<br>Insurance Agent       |                                                                 |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1200.00 |                                                                 |

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

2700.00

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

34164.49

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

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

|                                                                                                                                                 |             |                                                               |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Julie Dennis                                                                               |             | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 3 / 2 3 / 2 0 0 7 |  |
| Mailing Address 739 Wilson Avenue                                                                                                               |             | <b>Transaction ID:</b> C101235                                |  |
| City<br>Meskegon                                                                                                                                | State<br>MI | Amount of Each Receipt this Period<br>1000.00                 |  |
| Zip Code<br>49441                                                                                                                               |             |                                                               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             |                                                               |  |
| Name of Employer                                                                                                                                |             | Occupation                                                    |  |
| Receipt For: 2007<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>1000.00                           |  |

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

1000.00

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

1000.00

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

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

FOR LINE NUMBER: PAGE 27 / 32

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

A. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2007

☐ Primary ☐ General

☒ Other (specify) ▼

O

Aggregate Year-to-Date ▼

651.52

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 1 / 3 1 / 2 0 0 7

Transaction ID: C106398

Amount of Each Receipt this Period

92.85

Full Name (Last, First, Middle Initial)

B. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2007

☐ Primary ☐ General

☒ Other (specify) ▼

O

Aggregate Year-to-Date ▼

651.52

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 8 / 2 0 0 7

Transaction ID: C106399

Amount of Each Receipt this Period

90.04

Full Name (Last, First, Middle Initial)

C. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2007

☐ Primary ☐ General

☒ Other (specify) ▼

O

Aggregate Year-to-Date ▼

651.52

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 7

Transaction ID: C106400

Amount of Each Receipt this Period

118.04

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

300.93

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

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

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

FOR LINE NUMBER: PAGE 28 / 32

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

**A.** Full Name (Last, First, Middle Initial)  
CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼  
☐

Aggregate Year-to-Date ▼

651.52

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 7

Transaction ID: C106401

Amount of Each Receipt this Period

115.07

**B.** Full Name (Last, First, Middle Initial)  
CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼  
☐

Aggregate Year-to-Date ▼

651.52

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: C106402

Amount of Each Receipt this Period

119.34

**C.** Full Name (Last, First, Middle Initial)  
CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼  
☐

Aggregate Year-to-Date ▼

651.52

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 7

Transaction ID: C106403

Amount of Each Receipt this Period

116.18

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

350.59

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

651.52

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

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

FOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

## **A. Ngp Software**

Mailing Address 5505 Connecticut Ave NW  
# 277

City Washington State DC Zip Code 20015-2601

Purpose of Disbursement  
PAC Software

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

O

Transaction ID: D261

Date of Disbursement

02 / 08 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

## **B. Van Hollen For Congress**

Mailing Address 10605 Concord St

City Kensington State MD Zip Code 20895-2504

Purpose of Disbursement  
Contribution

Candidate Name  
Vanhollen

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MD District: 08

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

O

Transaction ID: D256

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

3000.00

# **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)

PAGE 30 / 32

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** Abercrombie For Congress

Mailing Address PO Box 636

City Annandale State VA Zip Code 22003-0636

Purpose of Disbursement  
Congress

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D266

Date of Disbursement

04 / 27 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** James Marlow

Mailing Address P.O. Box 1253

City Athens State GA Zip Code 30603

Purpose of Disbursement  
US House - 10th Congressional District

Candidate Name  
James Marlow

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: O

Transaction ID: D269

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C.** Jay Rockefeller

Mailing Address P.O. Box 1909

City Charleston State WV Zip Code 25327

Purpose of Disbursement  
US Senate-WV

Candidate Name  
Jay Rockefeller

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D267

Date of Disbursement

06 / 13 / 2007

Amount of Each Disbursement this Period

5000.00

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

8500.00

**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)

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|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input 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)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** Mr. Raul Grijalva

Mailing Address P.O. Box 1242

City  
Tucson

State  
AZ

Zip Code  
85702

Purpose of Disbursement  
AZ 7th Dist. Congressional Committee

Candidate Name  
Mr. Raul Grijalva

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D264

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Steve Israel For Congress

Mailing Address 928 Broadway, Suite 505

City  
New York

State  
NY

Zip Code  
10010

Purpose of Disbursement  
U.S. Congress

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D258

Date of Disbursement

04 / 19 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** STEVE ROTHMAN FOR NEW JERSEY INC.

Mailing Address P.O. Box 714

City  
Hackensack

State  
NJ

Zip Code  
07602

Purpose of Disbursement  
Congressional Seat

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 09

Transaction ID: D265

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

11500.00

# **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)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** Garamendi 2010

Mailing Address P.O. Box 496

City  
Sacramento

State  
CA

Zip Code  
95812

Purpose of Disbursement  
Lt. Gov. - CA

Candidate Name  
John Garamendi

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For: 2007  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D270

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

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

3000.00

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

3000.00