

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>	<input type="text" value=""/>	<input type="text" value="828183.17"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="991425.86"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="172237.80"/>	<input type="text" value="357670.69"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1163663.66"/>	<input type="text" value="1185853.86"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="31889.95"/>	<input type="text" value="54080.15"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1131773.71"/>	<input type="text" value="1131773.71"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2017 To: M M / D D / Y Y Y Y 12 / 31 / 2017

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	86253.31	157365.09
(ii) Unitemized	85694.33	199764.63
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	171947.64	357129.72
(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)	171947.64	357129.72
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).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	290.16	540.97
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	172237.80	357670.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	172237.80	357670.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	50.00	5300.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	50.00	5300.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19500.00	21500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	0.50
(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	0.50
29. Other Disbursements (Including Non-Federal Donations).....	12339.95	27279.65
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	31889.95	54080.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31889.95	54080.15

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	171947.64	357129.72
34. Total Contribution Refunds (from Line 28(d))	0.00	0.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	171947.64	357129.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	50.00	5300.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	50.00	5300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Abberger, Janette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 931 23Rd St Sw
 City Puyallup State WA Zip Code 98371
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #8 Occupation (for Individual) member
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 171.30

Date of Receipt 10 / 23 / 2017
 Transaction ID : C7305668
 Amount of Each Receipt this Period 161.70
 Memo Item

B. Aguirre, Rosalinda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7017 Greenwood Avenue N., #204
 City Seattle State WA Zip Code 98103
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Local 8 Occupation (for Individual) Recording Sec
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 610.00

Date of Receipt 07 / 20 / 2017
 Transaction ID : C7281426
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Aguirre, Rosalinda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7017 Greenwood Avenue N., #204
 City Seattle State WA Zip Code 98103
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Local 8 Occupation (for Individual) Recording Sec
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 610.00

Date of Receipt 08 / 16 / 2017
 Transaction ID : C7294120
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	221.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Aguirre, Rosalinda, , ,

Mailing Address 7017 Greenwood Avenue N., #204

City Seattle	State WA	Zip Code 98103
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) Local 8	Occupation (for Individual) Recording Sec
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7296753

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Aguirre, Rosalinda, , ,

Mailing Address 7017 Greenwood Avenue N., #204

City Seattle	State WA	Zip Code 98103
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) Local 8	Occupation (for Individual) Recording Sec
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7301088

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Aguirre, Rosalinda, , ,

Mailing Address 7017 Greenwood Avenue N., #204

City Seattle	State WA	Zip Code 98103
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) Local 8	Occupation (for Individual) Recording Sec
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7316309

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="90.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Aguirre, Rosalinda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7017 Greenwood Avenue N., #204
 City Seattle State WA Zip Code 98103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 8 Occupation (for Individual) Recording Sec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 11 / 14 / 2017
Transaction ID : C7325481
 Amount of Each Receipt this Period 80.00
 Memo Item

B. Aguirre, Rosalinda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7017 Greenwood Avenue N., #204
 City Seattle State WA Zip Code 98103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 8 Occupation (for Individual) Recording Sec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 12 / 07 / 2017
Transaction ID : C7329535
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Alexander, Rj, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lockheed Martin Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289388
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Alexander, Rj, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Lockheed Martin Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 120.00

Date of Receipt 10 / 27 / 2017
 Transaction ID : C7315840
 Amount of Each Receipt this Period 30.00
 Memo Item

B. ALLEN, ERIN, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7416 CLEMENTINE DR
 City CORONA State CA Zip Code 92880
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1200.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7284295
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ALLEN, ERIN, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7416 CLEMENTINE DR
 City CORONA State CA Zip Code 92880
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1200.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7284296
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ALLEN, ERIN, K, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
Mailing Address 7416 CLEMENTINE DR			Transaction ID : C7284297		
City CORONA	State CA	Zip Code 92880	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ALLEN, ERIN, K, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 7416 CLEMENTINE DR			Transaction ID : C7308335		
City CORONA	State CA	Zip Code 92880	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ALLEN, ERIN, K, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 7416 CLEMENTINE DR			Transaction ID : C7308339		
City CORONA	State CA	Zip Code 92880	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1200.00			

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. ALLEN, ERIN, K, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7416 CLEMENTINE DR

City CORONA	State CA	Zip Code 92880
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7308340

Amount of Each Receipt this Period
100.00

Memo Item

B. Allen, Walter, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7419 Cuvier St.

City La Jolla	State CA	Zip Code 92037
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OPEIU 30	Occupation (for Individual) ExDir/CFO
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
621.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2017

Transaction ID : C7289780

Amount of Each Receipt this Period
40.00

Memo Item

C. Allen, Walter, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7419 Cuvier St.

City La Jolla	State CA	Zip Code 92037
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OPEIU 30	Occupation (for Individual) ExDir/CFO
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
621.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2017

Transaction ID : C7295990

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Allen, Walter, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 14 / 2017
Mailing Address 7419 Cuvier St.			Transaction ID : C7299425
City La Jolla	State CA	Zip Code 92037	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) ExDir/CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 621.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Allen, Walter, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2017
Mailing Address 7419 Cuvier St.			Transaction ID : C7305995
City La Jolla	State CA	Zip Code 92037	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) ExDir/CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 621.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Allen, Walter, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2017
Mailing Address 7419 Cuvier St.			Transaction ID : C7322520
City La Jolla	State CA	Zip Code 92037	Amount of Each Receipt this Period 81.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) ExDir/CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 621.00	

SUBTOTAL of Receipts This Page (optional).....▶	171.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Allen, Walter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7419 Cuvier St.
 City La Jolla State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) ExDir/CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 621.00

Date of Receipt 11 / 14 / 2017
Transaction ID : C7325538
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Allen, Walter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7419 Cuvier St.
 City La Jolla State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) ExDir/CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 621.00

Date of Receipt 11 / 21 / 2017
Transaction ID : C7325855
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Allen, Walter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7419 Cuvier St.
 City La Jolla State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) ExDir/CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 621.00

Date of Receipt 12 / 20 / 2017
Transaction ID : C7335013
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALTIG, RICHARD, JR, ,

Mailing Address **PO BOX 208**

City WACO	State TX	Zip Code 76703
---------------------	--------------------	--------------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4992.00

Date of Receipt
07 / 31 / 2017

Transaction ID : C7285320

Amount of Each Receipt this Period
416.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALTIG, RICHARD, JR, ,

Mailing Address **PO BOX 208**

City WACO	State TX	Zip Code 76703
---------------------	--------------------	--------------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4992.00

Date of Receipt
07 / 31 / 2017

Transaction ID : C7285321

Amount of Each Receipt this Period
416.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALTIG, RICHARD, JR, ,

Mailing Address **PO BOX 208**

City WACO	State TX	Zip Code 76703
---------------------	--------------------	--------------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4992.00

Date of Receipt
07 / 31 / 2017

Transaction ID : C7285322

Amount of Each Receipt this Period
416.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1248.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. ALTIG, RICHARD, JR, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 208

City WACO	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4992.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309049

Amount of Each Receipt this Period
416.00

Memo Item

B. ALTIG, RICHARD, JR, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 208

City WACO	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4992.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309050

Amount of Each Receipt this Period
416.00

Memo Item

C. ALTIG, RICHARD, JR, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 208

City WACO	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4992.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309051

Amount of Each Receipt this Period
416.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1248.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 16 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. ANDERSON, JACQUELYN, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5329 SWEETSPRINGS WAY
 City POWDER SPRINGS State GA Zip Code 30127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288405
 Amount of Each Receipt this Period 28.00
 Memo Item

B. ANDERSON, JACQUELYN, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5329 SWEETSPRINGS WAY
 City POWDER SPRINGS State GA Zip Code 30127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7310851
 Amount of Each Receipt this Period 28.00
 Memo Item

C. ANDERSON, JACQUELYN, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5329 SWEETSPRINGS WAY
 City POWDER SPRINGS State GA Zip Code 30127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7310852
 Amount of Each Receipt this Period 28.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 84.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. ANDERSON, JACQUELYN, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5329 SWEETSPRINGS WAY

City POWDER SPRINGS	State GA	Zip Code 30127
------------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
112.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7310853

Amount of Each Receipt this Period
28.00

Memo Item

B. Andry, Deanna, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 S. 37th St., #6

City Richmond	State CA	Zip Code 94806
------------------	-------------	-------------------

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

Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2017

Transaction ID : C7335376

Amount of Each Receipt this Period
80.00

Memo Item

C. APRAHAMIAN, JULIE, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13235 W BURLEIGH RD #4

City BROOKSFIELD	State WI	Zip Code 53005
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7283359

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	118.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
APRAHAMIAN, JULIE, A, ,

Mailing Address 13235 W BURLEIGH RD #4

City BROOKSFIELD	State WI	Zip Code 53005
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7283360

Amount of Each Receipt this Period
10.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
APRAHAMIAN, JULIE, A, ,

Mailing Address 13235 W BURLEIGH RD #4

City BROOKSFIELD	State WI	Zip Code 53005
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7283361

Amount of Each Receipt this Period
10.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
APRAHAMIAN, JULIE, A, ,

Mailing Address 13235 W BURLEIGH RD #4

City BROOKSFIELD	State WI	Zip Code 53005
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7307642

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. APRAHAMIAN, JULIE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13235 W BURLEIGH RD #4
 City BROOKSFIELD State WI Zip Code 53005
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307643
 Amount of Each Receipt this Period 10.00
 Memo Item

B. APRAHAMIAN, JULIE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13235 W BURLEIGH RD #4
 City BROOKSFIELD State WI Zip Code 53005
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307644
 Amount of Each Receipt this Period 10.00
 Memo Item

C. ARCENEUX, LATORA, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23226 WHISPERING WILLO
 City SPRING State TX Zip Code 77373
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289275
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ARCENEUX, LATORA, E, ,

Mailing Address 23226 WHISPERING WILLO

City SPRING	State TX	Zip Code 77373
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7311810

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ARCENEUX, LATORA, E, ,

Mailing Address 23226 WHISPERING WILLO

City SPRING	State TX	Zip Code 77373
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7311811

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ARCENEUX, LATORA, E, ,

Mailing Address 23226 WHISPERING WILLO

City SPRING	State TX	Zip Code 77373
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7311812

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Arellano, Soralla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1109 Palm Avenue
 City National City State CA Zip Code 91950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Occupation (for Individual) Executive Board
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt **07 / 26 / 2017**
Transaction ID : C7289767
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Arellano, Soralla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1109 Palm Avenue
 City National City State CA Zip Code 91950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Occupation (for Individual) Executive Board
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt **09 / 14 / 2017**
Transaction ID : C7299426
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Arellano, Soralla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1109 Palm Avenue
 City National City State CA Zip Code 91950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Occupation (for Individual) Executive Board
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt **10 / 23 / 2017**
Transaction ID : C7305975
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Arellano, Soralla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1109 Palm Avenue
 City National City State CA Zip Code 91950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Occupation (for Individual) Executive Board
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt: 11 / 06 / 2017
Transaction ID : C7322537
 Amount of Each Receipt this Period: 2.00
 Memo Item

B. Arellano, Soralla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1109 Palm Avenue
 City National City State CA Zip Code 91950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Occupation (for Individual) Executive Board
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt: 12 / 20 / 2017
Transaction ID : C7335015
 Amount of Each Receipt this Period: 20.00
 Memo Item

C. ARIAS, SIMON, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 INDIAN MEADOW DR
 City MARS State PA Zip Code 16046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 07 / 31 / 2017
Transaction ID : C7282645
 Amount of Each Receipt this Period: 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	122.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. ARIAS, SIMON, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 INDIAN MEADOW DR

City MARS	State PA	Zip Code 16046
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282646

Amount of Each Receipt this Period
100.00

Memo Item

B. ARIAS, SIMON, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 INDIAN MEADOW DR

City MARS	State PA	Zip Code 16046
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282647

Amount of Each Receipt this Period
100.00

Memo Item

C. ARIAS, SIMON, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 INDIAN MEADOW DR

City MARS	State PA	Zip Code 16046
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7307042

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ARIAS, SIMON, A, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 103 INDIAN MEADOW DR			Transaction ID : C7307043		
City MARS	State PA	Zip Code 16046	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life Insurance		Occupation (for Individual) Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ARIAS, SIMON, A, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 103 INDIAN MEADOW DR			Transaction ID : C7307044		
City MARS	State PA	Zip Code 16046	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life Insurance		Occupation (for Individual) Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Arnold, Diane, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2017		
Mailing Address 712A 26th Avenue S			Transaction ID : C7305670		
City Seattle	State WA	Zip Code 98144	Amount of Each Receipt this Period 108.40		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU Local 8		Occupation (for Individual) associate member			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 147.60			

SUBTOTAL of Receipts This Page (optional).....	308.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Arnold, Diane, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2017		
Mailing Address 712A 26th Avenue S			Transaction ID : C7325485		
City Seattle	State WA	Zip Code 98144	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU Local 8		Occupation (for Individual) associate member			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 147.60			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Arony, Malka, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
Mailing Address 3217 E Tonto Ln			Transaction ID : C7289429		
City Phoenix	State AZ	Zip Code 85050	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Arony, Malka, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 3217 E Tonto Ln			Transaction ID : C7315750		
City Phoenix	State AZ	Zip Code 85050	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 600.00			

SUBTOTAL of Receipts This Page (optional).....▶	320.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Arrington, Dennis, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 4873 Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281602
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Arrington, Dennis, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 4873 Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **08 / 04 / 2017**
Transaction ID : C7293789
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Arrington, Dennis, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 4873 Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **09 / 05 / 2017**
Transaction ID : C7296622
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Arrington, Dennis, R, ,

Mailing Address 2222 Bull St

City Savannah	State GA	Zip Code 31401
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) Local 4873	Occupation (for Individual) Vice President
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7301111

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Arrington, Dennis, R, ,

Mailing Address 2222 Bull St

City Savannah	State GA	Zip Code 31401
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) Local 4873	Occupation (for Individual) Vice President
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7316063

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Arrington, Dennis, R, ,

Mailing Address 2222 Bull St

City Savannah	State GA	Zip Code 31401
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) Local 4873	Occupation (for Individual) Vice President
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7329537

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ARTEAGA, KARLA, , ,

Mailing Address 5213 LIVE OAK ST

City BELL GARDENS	State CA	Zip Code 90201
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7287928

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ARTEAGA, KARLA, , ,

Mailing Address 5213 LIVE OAK ST

City BELL GARDENS	State CA	Zip Code 90201
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7287929

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ARTEAGA, KARLA, , ,

Mailing Address 5213 LIVE OAK ST

City BELL GARDENS	State CA	Zip Code 90201
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7287930

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. ARTEAGA, KARLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5213 LIVE OAK ST
 City BELL GARDENS State CA Zip Code 90201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7310319
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Babaran, Lolita, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1549 Apache Dr., apt C Apt C
 City ChulaVista State CA Zip Code 91910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) Bus. Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 26 / 2017
Transaction ID : C7289773
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Babaran, Lolita, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1549 Apache Dr., apt C Apt C
 City ChulaVista State CA Zip Code 91910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) Bus. Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 21 / 2017
Transaction ID : C7295996
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Babaran, Lolita, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 14 / 2017		
Mailing Address 1549 Apache Dr., apt C Apt C			Transaction ID : C7299427		
City ChulaVista	State CA	Zip Code 91910	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) Bus. Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Babaran, Lolita, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2017		
Mailing Address 1549 Apache Dr., apt C Apt C			Transaction ID : C7305978		
City ChulaVista	State CA	Zip Code 91910	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) Bus. Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Babaran, Lolita, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2017		
Mailing Address 1549 Apache Dr., apt C Apt C			Transaction ID : C7325554		
City ChulaVista	State CA	Zip Code 91910	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) Bus. Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00			

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Babaran, Lolita, , ,			Date of Receipt MM / DD / YYYY 11 / 21 / 2017		
Mailing Address 1549 Apache Dr., apt C Apt C			Transaction ID : C7325857		
City ChulaVista	State CA	Zip Code 91910	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) Bus. Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Babaran, Lolita, , ,			Date of Receipt MM / DD / YYYY 12 / 20 / 2017		
Mailing Address 1549 Apache Dr., apt C Apt C			Transaction ID : C7335017		
City ChulaVista	State CA	Zip Code 91910	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) Bus. Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BAGGETT, MICHAEL, , ,			Date of Receipt MM / DD / YYYY 07 / 31 / 2017		
Mailing Address 5736 PORTSMOUTH LN			Transaction ID : C7287256		
City HOUSE SPRINGS	State MO	Zip Code 63051	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 175.00			

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. BAGGETT, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5736 PORTSMOUTH LN

City HOUSE SPRINGS	State MO	Zip Code 63051
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7287257

Amount of Each Receipt this Period
25.00

Memo Item

B. BAGGETT, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5736 PORTSMOUTH LN

City HOUSE SPRINGS	State MO	Zip Code 63051
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7287258

Amount of Each Receipt this Period
25.00

Memo Item

C. BAGGETT, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5736 PORTSMOUTH LN

City HOUSE SPRINGS	State MO	Zip Code 63051
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309976

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BAGGETT, MICHAEL, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 5736 PORTSMOUTH LN			Transaction ID : C7309977		
City HOUSE SPRINGS	State MO	Zip Code 63051	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 175.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BAGGETT, MICHAEL, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 5736 PORTSMOUTH LN			Transaction ID : C7309978		
City HOUSE SPRINGS	State MO	Zip Code 63051	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 175.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BAH, SOULEYMANE, T, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
Mailing Address 2370 MAGNOLIA TERR			Transaction ID : C7285258		
City HARRISBURG	State PA	Zip Code 17110	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1200.00			

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. BAH, SOULEYMANE, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2370 MAGNOLIA TERR
 City HARRISBURG State PA Zip Code 17110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285259
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BAH, SOULEYMANE, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2370 MAGNOLIA TERR
 City HARRISBURG State PA Zip Code 17110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285260
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BAH, SOULEYMANE, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2370 MAGNOLIA TERR
 City HARRISBURG State PA Zip Code 17110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309002
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. BAH, SOULEYMANE, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2370 MAGNOLIA TERR

City HARRISBURG	State PA	Zip Code 17110
--------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309003

Amount of Each Receipt this Period
100.00

Memo Item

B. BAH, SOULEYMANE, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2370 MAGNOLIA TERR

City HARRISBURG	State PA	Zip Code 17110
--------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309004

Amount of Each Receipt this Period
100.00

Memo Item

C. BAILEY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 W WASHINGTON ST

City MILLSTADT	State IL	Zip Code 62260
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284422

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. BAILEY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 W WASHINGTON ST

City MILLSTADT	State IL	Zip Code 62260
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284423

Amount of Each Receipt this Period
100.00

Memo Item

B. BAILEY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 W WASHINGTON ST

City MILLSTADT	State IL	Zip Code 62260
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284424

Amount of Each Receipt this Period
100.00

Memo Item

C. BAILEY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 W WASHINGTON ST

City MILLSTADT	State IL	Zip Code 62260
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7308418

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BAILEY, JAMES, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 302 W WASHINGTON ST			Transaction ID : C7308419		
City MILLSTADT	State IL	Zip Code 62260	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1150.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BAILEY, JAMES, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 302 W WASHINGTON ST			Transaction ID : C7308420		
City MILLSTADT	State IL	Zip Code 62260	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1150.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Bailey, Lena, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 20 / 2017		
Mailing Address 3201 Cherry Ridge St.,Ste.A109			Transaction ID : C7281603		
City San Antonio	State TX	Zip Code 78245	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU, Local 4873		Occupation (for Individual) Bus. Rep.			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1200.00			

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Bailey, Lena, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3201 Cherry Ridge St.,Ste.A109
 City San Antonio State TX Zip Code 78245
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local 4873 Occupation (for Individual) Bus. Rep.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 04 / 2017
Transaction ID : C7293790
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Bailey, Lena, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3201 Cherry Ridge St.,Ste.A109
 City San Antonio State TX Zip Code 78245
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local 4873 Occupation (for Individual) Bus. Rep.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 05 / 2017
Transaction ID : C7296623
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Bailey, Lena, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3201 Cherry Ridge St.,Ste.A109
 City San Antonio State TX Zip Code 78245
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local 4873 Occupation (for Individual) Bus. Rep.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 04 / 2017
Transaction ID : C7301112
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Bailey, Lena, , ,			Date of Receipt MM / DD / YYYY 10 / 31 / 2017
Mailing Address 3201 Cherry Ridge St.,Ste.A109			Transaction ID : C7316064
City San Antonio	State TX	Zip Code 78245	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) OPEIU, Local 4873		Occupation (for Individual) Bus. Rep.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bailey, Lena, , ,			Date of Receipt MM / DD / YYYY 12 / 07 / 2017
Mailing Address 3201 Cherry Ridge St.,Ste.A109			Transaction ID : C7329553
City San Antonio	State TX	Zip Code 78245	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) OPEIU, Local 4873		Occupation (for Individual) Bus. Rep.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Bailey, Mark, , ,			Date of Receipt MM / DD / YYYY 07 / 26 / 2017
Mailing Address 43874 Amazon Street			Transaction ID : C7289774
City Hemet	State CA	Zip Code 92544	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) Bus. Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Bailey, Mark, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 21 / 2017
Mailing Address 43874 Amazon Street			Transaction ID : C7295998
City Hemet	State CA	Zip Code 92544	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) Bus. Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bailey, Mark, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 14 / 2017
Mailing Address 43874 Amazon Street			Transaction ID : C7299428
City Hemet	State CA	Zip Code 92544	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) Bus. Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Bailey, Mark, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2017
Mailing Address 43874 Amazon Street			Transaction ID : C7305984
City Hemet	State CA	Zip Code 92544	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) Bus. Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Bailey, Mark, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2017
Mailing Address 43874 Amazon Street		Transaction ID : C7325552
City Hemet	State CA	Zip Code 92544
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 40.00
Name of Employer (for Individual) OPEIU 30	Occupation (for Individual) Bus. Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bailey, Mark, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2017
Mailing Address 43874 Amazon Street		Transaction ID : C7325859
City Hemet	State CA	Zip Code 92544
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 20.00
Name of Employer (for Individual) OPEIU 30	Occupation (for Individual) Bus. Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Bailey, Mark, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2017
Mailing Address 43874 Amazon Street		Transaction ID : C7335019
City Hemet	State CA	Zip Code 92544
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) OPEIU 30	Occupation (for Individual) Bus. Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. BANKS, ALFONSO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5107 MOUNTAIN BREEZE CT

City LA VERGNE	State TN	Zip Code 37086
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
233.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7289211

Amount of Each Receipt this Period
77.70

Memo Item

B. BANKS, ALFONSO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5107 MOUNTAIN BREEZE CT

City LA VERGNE	State TN	Zip Code 37086
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
233.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311732

Amount of Each Receipt this Period
77.70

Memo Item

C. BANKS, ALFONSO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5107 MOUNTAIN BREEZE CT

City LA VERGNE	State TN	Zip Code 37086
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
233.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311733

Amount of Each Receipt this Period
77.70

Memo Item

SUBTOTAL of Receipts This Page (optional).....	233.10
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 43 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Baxter, Annette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 Taft Ave.
 City SanDiego State CA Zip Code 92120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) DirMemServices
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **07 / 26 / 2017**
Transaction ID : C7289775
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Baxter, Annette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 Taft Ave.
 City SanDiego State CA Zip Code 92120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) DirMemServices
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **08 / 21 / 2017**
Transaction ID : C7296002
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Baxter, Annette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 Taft Ave.
 City SanDiego State CA Zip Code 92120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) DirMemServices
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **09 / 14 / 2017**
Transaction ID : C7299429
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Baxter, Annette, , ,		Date of Receipt MM / DD / YYYY 10 / 23 / 2017
Mailing Address 765 Taft Ave.		Transaction ID : C7305979
City SanDiego	State CA	Zip Code 92120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer (for Individual) OPEIU 30	Occupation (for Individual) DirMemServices	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Baxter, Annette, , ,		Date of Receipt MM / DD / YYYY 11 / 14 / 2017
Mailing Address 765 Taft Ave.		Transaction ID : C7325542
City SanDiego	State CA	Zip Code 92120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer (for Individual) OPEIU 30	Occupation (for Individual) DirMemServices	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Baxter, Michelle, M, ,		Date of Receipt MM / DD / YYYY 07 / 31 / 2017
Mailing Address PO Box 208		Transaction ID : C7289430
City Waco	State TX	Zip Code 76703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	190.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Baxter, Michelle, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7315782
 Amount of Each Receipt this Period 150.00
 Memo Item

B. BAYS, KEILEY, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9537 DAVID SCOTT DR
 City SAINT LOUIS State MO Zip Code 63126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285868
 Amount of Each Receipt this Period 10.00
 Memo Item

C. BAYS, KEILEY, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9537 DAVID SCOTT DR
 City SAINT LOUIS State MO Zip Code 63126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285869
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 170.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 46 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. BAYS, KEILEY, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9537 DAVID SCOTT DR
 City SAINT LOUIS State MO Zip Code 63126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285870
 Amount of Each Receipt this Period 10.00
 Memo Item

B. BAYS, KEILEY, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9537 DAVID SCOTT DR
 City SAINT LOUIS State MO Zip Code 63126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309386
 Amount of Each Receipt this Period 10.00
 Memo Item

C. BAYS, KEILEY, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9537 DAVID SCOTT DR
 City SAINT LOUIS State MO Zip Code 63126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309387
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 47 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Beard, Ralph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7289431
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Beard, Ralph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7315802
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Becker, Daphne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10604 25th Ave SW
 City Seattle State WA Zip Code 98146-1994
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IAM 751 Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 192.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2017
Transaction ID : C7281430
 Amount of Each Receipt this Period 16.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 76.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Becker, Daphne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10604 25th Ave SW
 City Seattle State WA Zip Code 98146-1994
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IAM 751 Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 192.00

Date of Receipt **08 / 16 / 2017**
Transaction ID : C7294124
 Amount of Each Receipt this Period 16.00
 Memo Item

B. Becker, Daphne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10604 25th Ave SW
 City Seattle State WA Zip Code 98146-1994
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IAM 751 Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 192.00

Date of Receipt **09 / 08 / 2017**
Transaction ID : C7296757
 Amount of Each Receipt this Period 16.00
 Memo Item

C. Becker, Daphne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10604 25th Ave SW
 City Seattle State WA Zip Code 98146-1994
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IAM 751 Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 192.00

Date of Receipt **10 / 04 / 2017**
Transaction ID : C7301092
 Amount of Each Receipt this Period 16.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	48.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Becker, Daphne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10604 25th Ave SW
 City Seattle State WA Zip Code 98146-1994
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IAM 751 Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 192.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2017
Transaction ID : C7316311
 Amount of Each Receipt this Period
 16.00
 Memo Item

B. Becker, Daphne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10604 25th Ave SW
 City Seattle State WA Zip Code 98146-1994
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IAM 751 Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 192.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2017
Transaction ID : C7329525
 Amount of Each Receipt this Period
 16.00
 Memo Item

C. Beckman, JASON, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7289432
 Amount of Each Receipt this Period
 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	92.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Beckman, JASON, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7315780
 Amount of Each Receipt this Period 60.00
 Memo Item

B. BENDURE, STEPHEN, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5715 SUMMER RIDGE LN
 City GALENA State OH Zip Code 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 180.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288949
 Amount of Each Receipt this Period 30.00
 Memo Item

C. BENDURE, STEPHEN, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5715 SUMMER RIDGE LN
 City GALENA State OH Zip Code 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 180.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288950
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. BENDURE, STEPHEN, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5715 SUMMER RIDGE LN

City GALENA	State OH	Zip Code 43021
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
180.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7288951

Amount of Each Receipt this Period

30.00

 Memo Item

B. BENDURE, STEPHEN, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5715 SUMMER RIDGE LN

City GALENA	State OH	Zip Code 43021
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
180.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311458

Amount of Each Receipt this Period

30.00

 Memo Item

C. BENDURE, STEPHEN, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5715 SUMMER RIDGE LN

City GALENA	State OH	Zip Code 43021
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
180.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311459

Amount of Each Receipt this Period

30.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. BENDURE, STEPHEN, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5715 SUMMER RIDGE LN

City GALENA	State OH	Zip Code 43021
----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7311460

Amount of Each Receipt this Period

Memo Item

B. Bitman, Yaroslav, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4704 Saratoga Falls Ln

City Raleigh	State NC	Zip Code 27614
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7282067

Amount of Each Receipt this Period

Memo Item

C. Bitman, Yaroslav, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4704 Saratoga Falls Ln

City Raleigh	State NC	Zip Code 27614
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7282068

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="230.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Bitman, Yaroslav, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017	
Mailing Address 4704 Saratoga Falls Ln			Transaction ID : C7282069	
City Raleigh	State NC	Zip Code 27614	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bitman, Yaroslav, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017	
Mailing Address 4704 Saratoga Falls Ln			Transaction ID : C7306494	
City Raleigh	State NC	Zip Code 27614	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Bitman, Yaroslav, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017	
Mailing Address 4704 Saratoga Falls Ln			Transaction ID : C7306495	
City Raleigh	State NC	Zip Code 27614	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1200.00		

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Bitman, Yaroslav, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4704 Saratoga Falls Ln
 City Raleigh State NC Zip Code 27614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7306496
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Blackman, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7801 Fairway Blvd.
 City Miramar State FL Zip Code 33023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 100 Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 198.00

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281489
 Amount of Each Receipt this Period 87.00
 Memo Item

C. Blackman, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7801 Fairway Blvd.
 City Miramar State FL Zip Code 33023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 100 Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 198.00

Date of Receipt **08 / 18 / 2017**
Transaction ID : C7294303
 Amount of Each Receipt this Period 1.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	188.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Blackman, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7801 Fairway Blvd.
 City Miramar State FL Zip Code 33023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 100 Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 198.00

Date of Receipt
 08 / 18 / 2017
Transaction ID : C7294304
 Amount of Each Receipt this Period 1.00
 Memo Item

B. Blackman, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7801 Fairway Blvd.
 City Miramar State FL Zip Code 33023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 100 Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 198.00

Date of Receipt
 08 / 18 / 2017
Transaction ID : C7294305
 Amount of Each Receipt this Period 1.00
 Memo Item

C. Blackman, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7801 Fairway Blvd.
 City Miramar State FL Zip Code 33023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 100 Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 198.00

Date of Receipt
 08 / 18 / 2017
Transaction ID : C7294306
 Amount of Each Receipt this Period 1.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Blackman, Gregory, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7801 Fairway Blvd.

City Miramar	State FL	Zip Code 33023
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Local 100	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
198.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2017

Transaction ID : C7294855

Amount of Each Receipt this Period

1.00

 Memo Item

B. Blackman, Gregory, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7801 Fairway Blvd.

City Miramar	State FL	Zip Code 33023
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Local 100	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
198.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2017

Transaction ID : C7326695

Amount of Each Receipt this Period

1.00

 Memo Item

C. Blackman, Gregory, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7801 Fairway Blvd.

City Miramar	State FL	Zip Code 33023
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Local 100	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
198.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2017

Transaction ID : C7326699

Amount of Each Receipt this Period

1.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Blackman, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7801 Fairway Blvd.
 City Miramar State FL Zip Code 33023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 100 Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 198.00

Date of Receipt
 11 / 21 / 2017
Transaction ID : C7326702
 Amount of Each Receipt this Period 1.00
 Memo Item

B. Blackman, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7801 Fairway Blvd.
 City Miramar State FL Zip Code 33023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 100 Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 198.00

Date of Receipt
 11 / 21 / 2017
Transaction ID : C7326705
 Amount of Each Receipt this Period 1.00
 Memo Item

C. Blackman, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7801 Fairway Blvd.
 City Miramar State FL Zip Code 33023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 100 Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 198.00

Date of Receipt
 11 / 21 / 2017
Transaction ID : C7326708
 Amount of Each Receipt this Period 1.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Blackman, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7801 Fairway Blvd.
 City Miramar State FL Zip Code 33023
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Local 100 Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 198.00

Date of Receipt 11 / 21 / 2017
Transaction ID : C7326711
 Amount of Each Receipt this Period 1.00
 Memo Item

B. Blackman, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7801 Fairway Blvd.
 City Miramar State FL Zip Code 33023
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Local 100 Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 198.00

Date of Receipt 11 / 21 / 2017
Transaction ID : C7326714
 Amount of Each Receipt this Period 1.00
 Memo Item

C. Blaisdell, David, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 537 Hogan Branch Rd
 City Goodlettsville State TN Zip Code 37072
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 360.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289433
 Amount of Each Receipt this Period 90.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	92.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Blaisdell, David, E, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 537 Hogan Branch Rd			Transaction ID : C7315773		
City Goodlettsville	State TN	Zip Code 37072	Amount of Each Receipt this Period 90.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bohelski, Thomas, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2017		
Mailing Address 2222 Bull Street			Transaction ID : C7316065		
City Savannah	State GA	Zip Code 31401	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Local 4873		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 100.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Bohelski, Thomas, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2017		
Mailing Address 2222 Bull Street			Transaction ID : C7329538		
City Savannah	State GA	Zip Code 31401	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Local 4873		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 100.00			

SUBTOTAL of Receipts This Page (optional).....	190.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. BOLLES, DIANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 208

City Waco	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) National Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
140.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7289673

Amount of Each Receipt this Period
20.00

Memo Item

B. BOOZERCOLEY, CAROL, K, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6577 SNOWBIRD LN

City DOUGLASVILLE	State GA	Zip Code 30134
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7313347

Amount of Each Receipt this Period
20.00

Memo Item

C. BOOZERCOLEY, CAROL, K, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6577 SNOWBIRD LN

City DOUGLASVILLE	State GA	Zip Code 30134
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7313348

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BOOZERCOLEY, CAROL, K, ,			Date of Receipt
Mailing Address 6577 SNOWBIRD LN			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City DOUGLASVILLE	State GA	Zip Code 30134	Transaction ID : C7313349
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="120.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BOOZERCOLEY, CAROL, K, ,			Date of Receipt
Mailing Address 6577 SNOWBIRD LN			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City DOUGLASVILLE	State GA	Zip Code 30134	Transaction ID : C7313350
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="60.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="120.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Borba, Leanna, , ,			Date of Receipt
Mailing Address 320 Morris Phelps Dr.			<input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2017"/>
City Tracy	State CA	Zip Code 95376	Transaction ID : C7289746
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) Information Requested		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="128.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="130.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Borba, Leanna, , ,			Date of Receipt
Mailing Address 320 Morris Phelps Dr.			<input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2017"/>
City Tracy	State CA	Zip Code 95376	Transaction ID : C7329435
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer (for Individual) Information Requested		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="128.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BORJAS, ANDREA, P, ,			Date of Receipt
Mailing Address 3217 PLEASANT AVE			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City UNION CITY	State NJ	Zip Code 07087	Transaction ID : C7288829
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="150.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BORJAS, ANDREA, P, ,			Date of Receipt
Mailing Address 3217 PLEASANT AVE			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City UNION CITY	State NJ	Zip Code 07087	Transaction ID : C7288830
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <input type="text" value="150.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 63 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BORJAS, ANDREA, P, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017
Mailing Address 3217 PLEASANT AVE		Transaction ID : C7288831
City UNION CITY	State NJ	Zip Code 07087
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BORJAS, ANDREA, P, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017
Mailing Address 3217 PLEASANT AVE		Transaction ID : C7311344
City UNION CITY	State NJ	Zip Code 07087
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BORJAS, ANDREA, P, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017
Mailing Address 3217 PLEASANT AVE		Transaction ID : C7311345
City UNION CITY	State NJ	Zip Code 07087
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 150.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. BORJAS, ANDREA, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3217 PLEASANT AVE
 City UNION CITY State NJ Zip Code 07087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311346
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Brenton, John, , , IV
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull Street Suite 200
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 4873 Occupation (for Individual) Sec.-Treas.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 396.00

Date of Receipt 07 / 20 / 2017
Transaction ID : C7281604
 Amount of Each Receipt this Period 33.00
 Memo Item

C. Brenton, John, , , IV
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull Street Suite 200
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 4873 Occupation (for Individual) Sec.-Treas.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 396.00

Date of Receipt 08 / 04 / 2017
Transaction ID : C7293791
 Amount of Each Receipt this Period 33.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	91.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Brenton, John, , , IV			Date of Receipt
Mailing Address 2222 Bull Street Suite 200			<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2017"/>
City Savannah	State GA	Zip Code 31401	Transaction ID : C7296625
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="33.00"/>
Name of Employer (for Individual) Local 4873		Occupation (for Individual) Sec.-Treas.	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="396.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Brenton, John, , , IV			Date of Receipt
Mailing Address 2222 Bull Street Suite 200			<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2017"/>
City Savannah	State GA	Zip Code 31401	Transaction ID : C7301115
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="33.00"/>
Name of Employer (for Individual) Local 4873		Occupation (for Individual) Sec.-Treas.	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="396.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Brenton, John, , , IV			Date of Receipt
Mailing Address 2222 Bull Street Suite 200			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City Savannah	State GA	Zip Code 31401	Transaction ID : C7316067
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="33.00"/>
Name of Employer (for Individual) Local 4873		Occupation (for Individual) Sec.-Treas.	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="396.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="99.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Brenton, John, , , IV
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull Street
 Suite 200
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 4873 Occupation (for Individual) Sec.-Treas.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 396.00

Date of Receipt **12 / 07 / 2017**
Transaction ID : C7329539
 Amount of Each Receipt this Period 33.00
 Memo Item

B. BROWN, DORIAN, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1706 15TH ST NW
 City WINTER HAVEN State FL Zip Code 33881
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282740
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BROWN, DORIAN, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1706 15TH ST NW
 City WINTER HAVEN State FL Zip Code 33881
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282741
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	233.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. BROWN, DORIAN, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1706 15TH ST NW

City WINTER HAVEN	State FL	Zip Code 33881
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282742

Amount of Each Receipt this Period
100.00

Memo Item

B. BROWN, DORIAN, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1706 15TH ST NW

City WINTER HAVEN	State FL	Zip Code 33881
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7307125

Amount of Each Receipt this Period
100.00

Memo Item

C. BROWN, DORIAN, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1706 15TH ST NW

City WINTER HAVEN	State FL	Zip Code 33881
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7307126

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BUCKLEY, ANTONIO, L, ,

Mailing Address 2252 SAWGRASS DR

City HAMPTON	State GA	Zip Code 30228
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7288406

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BUCKLEY, ANTONIO, L, ,

Mailing Address 2252 SAWGRASS DR

City HAMPTON	State GA	Zip Code 30228
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7310854

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BUCKLEY, ANTONIO, L, ,

Mailing Address 2252 SAWGRASS DR

City HAMPTON	State GA	Zip Code 30228
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7310855

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="84.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. BUCKLEY, ANTONIO, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2252 SAWGRASS DR
 City HAMPTON State GA Zip Code 30228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7310856
 Amount of Each Receipt this Period 28.00
 Memo Item

B. Budnick, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Ex. Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 20 / 2017
Transaction ID : C7281606
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Budnick, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Ex. Secretary
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 04 / 2017
Transaction ID : C7293793
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	78.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 70 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Budnick, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Ex. Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 05 / 2017
Transaction ID : C7296626
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Budnick, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Ex. Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 04 / 2017
Transaction ID : C7301116
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Budnick, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Ex. Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2017
Transaction ID : C7316068
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Budnick, Lisa, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2222 Bull St

City Savannah	State GA	Zip Code 31401
------------------	-------------	-------------------

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

Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Ex. Secretary
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2017

Transaction ID : C7329541

Amount of Each Receipt this Period
25.00

Memo Item

B. BUI, ANH, Q, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 926 BROADMOOR CIR

City BATON ROUGE	State LA	Zip Code 70815
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7285737

Amount of Each Receipt this Period
10.00

Memo Item

C. BUI, ANH, Q, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 926 BROADMOOR CIR

City BATON ROUGE	State LA	Zip Code 70815
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7285738

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 72 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. BUI, ANH, Q, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 926 BROADMOOR CIR

City BATON ROUGE	State LA	Zip Code 70815
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7285739

Amount of Each Receipt this Period
10.00

Memo Item

B. BUI, ANH, Q, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 926 BROADMOOR CIR

City BATON ROUGE	State LA	Zip Code 70815
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7309303

Amount of Each Receipt this Period
10.00

Memo Item

C. BUI, ANH, Q, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 926 BROADMOOR CIR

City BATON ROUGE	State LA	Zip Code 70815
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7309304

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BUI, ANH, Q, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 926 BROADMOOR CIR			Transaction ID : C7309305		
City BATON ROUGE	State LA	Zip Code 70815	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life Ins.		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 100.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Busby, Lou Nell, NELL, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
Mailing Address 6750 Enville Rd			Transaction ID : C7282058		
City Henderson	State TN	Zip Code 38340	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 120.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Busby, Lou Nell, NELL, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
Mailing Address 6750 Enville Rd			Transaction ID : C7282059		
City Henderson	State TN	Zip Code 38340	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 120.00			

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Busby, Lou Nell, NELL, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6750 Enville Rd
 City Henderson State TN Zip Code 38340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282060
 Amount of Each Receipt this Period 20.00
 Memo Item

B. BUSBY, NELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6750 ENVILLE RD
 City HENDERSON State TN Zip Code 38340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7307764
 Amount of Each Receipt this Period 20.00
 Memo Item

C. BUSBY, NELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6750 ENVILLE RD
 City HENDERSON State TN Zip Code 38340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7307765
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 75 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. BUSBY, NELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6750 ENVILLE RD
 City HENDERSON State TN Zip Code 38340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307766
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Carey, Holly, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8134 This Way #C
 City Citrus Heights State CA Zip Code 95610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local 29 Occupation (for Individual) member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 111.00

Date of Receipt 07 / 20 / 2017
Transaction ID : C7281421
 Amount of Each Receipt this Period 1.00
 Memo Item

C. Carey, Holly, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8134 This Way #C
 City Citrus Heights State CA Zip Code 95610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local 29 Occupation (for Individual) member
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 111.00

Date of Receipt 07 / 26 / 2017
Transaction ID : C7289732
 Amount of Each Receipt this Period 1.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 22.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Carey, Holly, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8134 This Way #C
 City Citrus Heights State CA Zip Code 95610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local 29 Occupation (for Individual) member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 111.00

Date of Receipt 08 / 04 / 2017
Transaction ID : C7293807
 Amount of Each Receipt this Period 1.00
 Memo Item

B. Carey, Holly, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8134 This Way #C
 City Citrus Heights State CA Zip Code 95610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local 29 Occupation (for Individual) member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 111.00

Date of Receipt 08 / 21 / 2017
Transaction ID : C7295908
 Amount of Each Receipt this Period 1.00
 Memo Item

C. Carey, Holly, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8134 This Way #C
 City Citrus Heights State CA Zip Code 95610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local 29 Occupation (for Individual) member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 111.00

Date of Receipt 09 / 18 / 2017
Transaction ID : C7298597
 Amount of Each Receipt this Period 1.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Carey, Holly, L, ,			Date of Receipt
Mailing Address 8134 This Way #C			<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2017"/>
City Citrus Heights	State CA	Zip Code 95610	Transaction ID : C7300432
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="1.00"/>
Name of Employer (for Individual) OPEIU, Local 29		Occupation (for Individual) member	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="111.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Carey, Holly, L, ,			Date of Receipt
Mailing Address 8134 This Way #C			<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2017"/>
City Citrus Heights	State CA	Zip Code 95610	Transaction ID : C7301107
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="1.00"/>
Name of Employer (for Individual) OPEIU, Local 29		Occupation (for Individual) member	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="111.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Carey, Holly, L, ,			Date of Receipt
Mailing Address 8134 This Way #C			<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2017"/>
City Citrus Heights	State CA	Zip Code 95610	Transaction ID : C7305905
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="1.00"/>
Name of Employer (for Individual) OPEIU, Local 29		Occupation (for Individual) member	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="111.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="3.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Carey, Holly, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8134 This Way #C
 City Citrus Heights State CA Zip Code 95610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local 29 Occupation (for Individual) member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 111.00

Date of Receipt 10 / 30 / 2017
Transaction ID : C7315997
 Amount of Each Receipt this Period 1.00
 Memo Item

B. Carey, Holly, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8134 This Way #C
 City Citrus Heights State CA Zip Code 95610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local 29 Occupation (for Individual) member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 111.00

Date of Receipt 11 / 17 / 2017
Transaction ID : C7325837
 Amount of Each Receipt this Period 1.00
 Memo Item

C. Carey, Holly, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8134 This Way #C
 City Citrus Heights State CA Zip Code 95610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local 29 Occupation (for Individual) member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 111.00

Date of Receipt 11 / 28 / 2017
Transaction ID : C7326445
 Amount of Each Receipt this Period 1.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Carey, Holly, L, ,		Date of Receipt MM / DD / YYYY 12 / 07 / 2017
Mailing Address 8134 This Way #C		Transaction ID : C7329444
City Citrus Heights	State CA	Zip Code 95610
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer (for Individual) OPEIU, Local 29	Occupation (for Individual) member	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 111.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Carey, Holly, L, ,		Date of Receipt MM / DD / YYYY 12 / 12 / 2017
Mailing Address 8134 This Way #C		Transaction ID : C7334652
City Citrus Heights	State CA	Zip Code 95610
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
Name of Employer (for Individual) OPEIU, Local 29	Occupation (for Individual) member	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 111.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Carey, Holly, L, ,		Date of Receipt MM / DD / YYYY 12 / 27 / 2017
Mailing Address 8134 This Way #C		Transaction ID : C7335363
City Citrus Heights	State CA	Zip Code 95610
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
Name of Employer (for Individual) OPEIU, Local 29	Occupation (for Individual) member	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 111.00	

SUBTOTAL of Receipts This Page (optional).....▶	22.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. CARRICHE, OSIRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4109 W 25TH PL
 City CHICAGO State IL Zip Code 60623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 145.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7313482
 Amount of Each Receipt this Period 29.00
 Memo Item

B. CARRICHE, OSIRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4109 W 25TH PL
 City CHICAGO State IL Zip Code 60623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 145.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7313483
 Amount of Each Receipt this Period 58.00
 Memo Item

C. CARRICHE, OSIRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4109 W 25TH PL
 City CHICAGO State IL Zip Code 60623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 145.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7313484
 Amount of Each Receipt this Period 29.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	116.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. CARRICHE, OSIRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4109 W 25TH PL
 City CHICAGO State IL Zip Code 60623
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 145.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7313485
 Amount of Each Receipt this Period 29.00
 Memo Item

B. CARVAJAL, JOSE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1818 ROGERS RD #1238
 City SAN ANTONIO State TX Zip Code 78251
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7283066
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CARVAJAL, JOSE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1818 ROGERS RD #1238
 City SAN ANTONIO State TX Zip Code 78251
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7283067
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	229.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CARVAJAL, JOSE, A, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
Mailing Address 1818 ROGERS RD #1238			Transaction ID : C7283068		
City SAN ANTONIO	State TX	Zip Code 78251	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life Insurance		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CARVAJAL, JOSE, A, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 1818 ROGERS RD #1238			Transaction ID : C7307405		
City SAN ANTONIO	State TX	Zip Code 78251	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life Insurance		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CARVAJAL, JOSE, A, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 1818 ROGERS RD #1238			Transaction ID : C7307406		
City SAN ANTONIO	State TX	Zip Code 78251	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life Insurance		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1200.00			

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. CARVAJAL, JOSE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1818 ROGERS RD #1238
 City SAN ANTONIO State TX Zip Code 78251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307407
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Casey, Juliet, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1015 Howard Grove Ct
 City Davidsonville State MD Zip Code 21035-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU S-T's Office Occupation (for Individual) ASSIST. TO ST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 07 / 20 / 2017
Transaction ID : C7281474
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Casey, Juliet, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1015 Howard Grove Ct
 City Davidsonville State MD Zip Code 21035-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU S-T's Office Occupation (for Individual) ASSIST. TO ST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 08 / 18 / 2017
Transaction ID : C7295918
 Amount of Each Receipt this Period 2.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	132.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Casey, Juliet, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1015 Howard Grove Ct
 City Davidsonville State MD Zip Code 21035-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU S-T's Office Occupation (for Individual) ASSIST. TO ST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 14 / 2017
Transaction ID : C7298602
 Amount of Each Receipt this Period 3.00
 Memo Item

B. CHUI, SAMANTHA, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2327 TALLAPOOSA DR
 City DULUTH State GA Zip Code 30097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282517
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CHUI, SAMANTHA, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2327 TALLAPOOSA DR
 City DULUTH State GA Zip Code 30097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282518
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	203.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 85 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. CHUI, SAMANTHA, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2327 TALLAPOOSA DR
 City DULUTH State GA Zip Code 30097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7282519
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. CHUI, SAMANTHA, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2327 TALLAPOOSA DR
 City DULUTH State GA Zip Code 30097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7306914
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. CHUI, SAMANTHA, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2327 TALLAPOOSA DR
 City DULUTH State GA Zip Code 30097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7306915
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. CHUI, SAMANTHA, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2327 TALLAPOOSA DR
 City DULUTH State GA Zip Code 30097
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) National Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306916
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CLARK, CHRISTOPHER, XX, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 628 PUNAA ST
 City KAILUA State HI Zip Code 96734
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285691
 Amount of Each Receipt this Period 10.00
 Memo Item

C. CLARK, CHRISTOPHER, XX, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 628 PUNAA ST
 City KAILUA State HI Zip Code 96734
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285692
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CLARK, CHRISTOPHER, XX, ,

Mailing Address 628 PUNAA ST

City KAILUA	State HI	Zip Code 96734
----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7285693

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CLARK, CHRISTOPHER, XX, ,

Mailing Address 628 PUNAA ST

City KAILUA	State HI	Zip Code 96734
----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7309285

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CLARK, CHRISTOPHER, XX, ,

Mailing Address 628 PUNAA ST

City KAILUA	State HI	Zip Code 96734
----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7309286

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="30.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. CLARK, CHRISTOPHER, XX, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 628 PUNAA ST
 City KAILUA State HI Zip Code 96734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309287
 Amount of Each Receipt this Period 10.00
 Memo Item

B. CLARK, TIMOTHY, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17092 SUNSET DR
 City CHAGRIN FALLS State OH Zip Code 44023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 180.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288980
 Amount of Each Receipt this Period 30.00
 Memo Item

C. CLARK, TIMOTHY, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17092 SUNSET DR
 City CHAGRIN FALLS State OH Zip Code 44023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 180.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288981
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. CLARK, TIMOTHY, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17092 SUNSET DR

City CHAGRIN FALLS	State OH	Zip Code 44023
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
180.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7288982

Amount of Each Receipt this Period

30.00

 Memo Item

B. CLARK, TIMOTHY, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17092 SUNSET DR

City CHAGRIN FALLS	State OH	Zip Code 44023
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
180.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311493

Amount of Each Receipt this Period

30.00

 Memo Item

C. CLARK, TIMOTHY, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17092 SUNSET DR

City CHAGRIN FALLS	State OH	Zip Code 44023
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
180.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311494

Amount of Each Receipt this Period

30.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. CLARK, TIMOTHY, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17092 SUNSET DR
 City CHAGRIN FALLS State OH Zip Code 44023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 180.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311495
 Amount of Each Receipt this Period 30.00
 Memo Item

B. CLECKNER, JARED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14220 W 123RD TER
 City OLATHE State KS Zip Code 66062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282748
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CLECKNER, JARED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14220 W 123RD TER
 City OLATHE State KS Zip Code 66062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282749
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. CLECKNER, JARED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14220 W 123RD TER
 City OLATHE State KS Zip Code 66062
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282750
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CLECKNER, JARED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14220 W 123RD TER
 City OLATHE State KS Zip Code 66062
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307132
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CLECKNER, JARED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14220 W 123RD TER
 City OLATHE State KS Zip Code 66062
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307133
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. CLECKNER, JARED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14220 W 123RD TER
 City OLATHE State KS Zip Code 66062
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2017
 Transaction ID : C7307134
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Cochran, Eric, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 Se Princeton PI
 City Lees Summit State MO Zip Code 64081
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7282416
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Cochran, Eric, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 Se Princeton PI
 City Lees Summit State MO Zip Code 64081
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7282417
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Cochran, Eric, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 Se Princeton PI
 City Lees Summit State MO Zip Code 64081
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282418
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Cochran, Eric, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 Se Princeton PI
 City Lees Summit State MO Zip Code 64081
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306818
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Cochran, Eric, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 Se Princeton PI
 City Lees Summit State MO Zip Code 64081
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306819
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Cochran, Eric, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 Se Princeton Pl
 City Lees Summit State MO Zip Code 64081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7306820
 Amount of Each Receipt this Period 100.00
 Memo Item

B. COHEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 208
 City WACO State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7285330
 Amount of Each Receipt this Period 150.00
 Memo Item

C. COHEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 208
 City WACO State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7285331
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. COHEN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 208

City WACO	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7285332

Amount of Each Receipt this Period
150.00

Memo Item

B. COHEN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 208

City WACO	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309058

Amount of Each Receipt this Period
150.00

Memo Item

C. COHEN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 208

City WACO	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309059

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. COHEN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 208

City WACO	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7309060

Amount of Each Receipt this Period
150.00

Memo Item

B. Cohen, Micah, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 208

City Waco	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7282469

Amount of Each Receipt this Period
150.00

Memo Item

C. Cohen, Micah, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 208

City Waco	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7282470

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Cohen, Micah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282471
 Amount of Each Receipt this Period 150.00
 Memo Item

B. Cohen, Micah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7306864
 Amount of Each Receipt this Period 150.00
 Memo Item

C. Cohen, Micah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7306865
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Cohen, Micah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306866
 Amount of Each Receipt this Period 150.00
 Memo Item

B. COLE, DAVREN, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2080 FRIAR TUCK LN
 City ORANGE CITY State FL Zip Code 32763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288201
 Amount of Each Receipt this Period 50.00
 Memo Item

C. COLE, DAVREN, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2080 FRIAR TUCK LN
 City ORANGE CITY State FL Zip Code 32763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7310644
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 99 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. COLE, DAVREN, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2080 FRIAR TUCK LN

City ORANGE CITY	State FL	Zip Code 32763
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7310645

Amount of Each Receipt this Period

Memo Item

B. COLE, DAVREN, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2080 FRIAR TUCK LN

City ORANGE CITY	State FL	Zip Code 32763
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7310646

Amount of Each Receipt this Period

Memo Item

C. Colvin, Maureen, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12101 NE 50th AVE.

City Vancouver	State WA	Zip Code 98686
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7325516

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="200.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Conley, Dennis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Sec. Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281607
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Conley, Dennis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Sec. Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **08 / 04 / 2017**
Transaction ID : C7293794
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Conley, Dennis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Sec. Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **09 / 05 / 2017**
Transaction ID : C7296627
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 101 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Conley, Dennis, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 04 / 2017
Mailing Address 2222 Bull St			Transaction ID : C7301117
City Savannah	State GA	Zip Code 31401	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OPEIU, Local #4873		Occupation (for Individual) Sec. Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Conley, Dennis, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2017
Mailing Address 2222 Bull St			Transaction ID : C7316069
City Savannah	State GA	Zip Code 31401	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OPEIU, Local #4873		Occupation (for Individual) Sec. Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Conley, Dennis, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2017
Mailing Address 2222 Bull St			Transaction ID : C7329542
City Savannah	State GA	Zip Code 31401	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OPEIU, Local #4873		Occupation (for Individual) Sec. Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
COOK, RANDALL, D, ,

Mailing Address 12224 SUTTERS HILL CT

City CHARLOTTE	State NC	Zip Code 28269
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7283575

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
COOK, RANDALL, D, ,

Mailing Address 12224 SUTTERS HILL CT

City CHARLOTTE	State NC	Zip Code 28269
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7283576

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
COOK, RANDALL, D, ,

Mailing Address 12224 SUTTERS HILL CT

City CHARLOTTE	State NC	Zip Code 28269
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7283577

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 103 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. COOK, RANDALL, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12224 SUTTERS HILL CT

City CHARLOTTE	State NC	Zip Code 28269
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307812

Amount of Each Receipt this Period

Memo Item

B. COOK, RANDALL, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12224 SUTTERS HILL CT

City CHARLOTTE	State NC	Zip Code 28269
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307813

Amount of Each Receipt this Period

Memo Item

C. COOK, RANDALL, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12224 SUTTERS HILL CT

City CHARLOTTE	State NC	Zip Code 28269
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307814

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Corral, Carmen, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 26 / 2017
Mailing Address 808 Caminito Del Reposo			Transaction ID : C7289776
City Carlsbad	State CA	Zip Code 92008	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Kaiser		Occupation (for Individual) Executive Board	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Corral, Carmen, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 14 / 2017
Mailing Address 808 Caminito Del Reposo			Transaction ID : C7299430
City Carlsbad	State CA	Zip Code 92008	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Kaiser		Occupation (for Individual) Executive Board	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Corral, Carmen, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2017
Mailing Address 808 Caminito Del Reposo			Transaction ID : C7305983
City Carlsbad	State CA	Zip Code 92008	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Kaiser		Occupation (for Individual) Executive Board	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Corral, Carmen, , ,			Date of Receipt
Mailing Address 808 Caminito Del Reposo			<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2017"/>
City Carlsbad	State CA	Zip Code 92008	Transaction ID : C7322486
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="40.00"/>
Name of Employer (for Individual) Kaiser		Occupation (for Individual) Executive Board	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="280.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Corral, Carmen, , ,			Date of Receipt
Mailing Address 808 Caminito Del Reposo			<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2017"/>
City Carlsbad	State CA	Zip Code 92008	Transaction ID : C7335023
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="40.00"/>
Name of Employer (for Individual) Kaiser		Occupation (for Individual) Executive Board	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="280.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. COSTILLA, VINCENT, , ,			Date of Receipt
Mailing Address 5004 MALAGA LANE			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City MCALLEN	State TX	Zip Code 78504	Transaction ID : C7287741
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="100.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="105.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. COSTILLA, VINCENT, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017
Mailing Address 5004 MALAGA LANE			Transaction ID : C7287742
City MCALLEN	State TX	Zip Code 78504	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 100.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CROWE, NIGEL, A, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017
Mailing Address 16611 HIGHLAND SUMMIT DR			Transaction ID : C7282636
City WILDWOOD	State MO	Zip Code 63011	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Income Life Insurance		Occupation (for Individual) Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CROWE, NIGEL, A, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017
Mailing Address 16611 HIGHLAND SUMMIT DR			Transaction ID : C7282637
City WILDWOOD	State MO	Zip Code 63011	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Income Life Insurance		Occupation (for Individual) Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. CROWE, NIGEL, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16611 HIGHLAND SUMMIT DR
 City WILDWOOD State MO Zip Code 63011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282638
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CROWE, NIGEL, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16611 HIGHLAND SUMMIT DR
 City WILDWOOD State MO Zip Code 63011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7307034
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CROWE, NIGEL, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16611 HIGHLAND SUMMIT DR
 City WILDWOOD State MO Zip Code 63011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7307035
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 108 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CROWE, NIGEL, A, ,

Mailing Address 16611 HIGHLAND SUMMIT DR

City WILDWOOD	State MO	Zip Code 63011
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017

Transaction ID : C7307036

Amount of Each Receipt this Period
 100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CUNNINGHAM, JAMES, X, ,

Mailing Address 12319 WHISPERING BREEZ DR

City FISHERS	State IN	Zip Code 46037
-----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017

Transaction ID : C7284949

Amount of Each Receipt this Period
 50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CUNNINGHAM, JAMES, X, ,

Mailing Address 12319 WHISPERING BREEZ DR

City FISHERS	State IN	Zip Code 46037
-----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017

Transaction ID : C7284950

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CUNNINGHAM, JAMES, X, ,

Mailing Address 12319 WHISPERING BREEZ DR

City FISHERS	State IN	Zip Code 46037
-----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284951

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CUNNINGHAM, JAMES, X, ,

Mailing Address 12319 WHISPERING BREEZ DR

City FISHERS	State IN	Zip Code 46037
-----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7308804

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CUNNINGHAM, JAMES, X, ,

Mailing Address 12319 WHISPERING BREEZ DR

City FISHERS	State IN	Zip Code 46037
-----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7308805

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. CUNNINGHAM, JAMES, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12319 WHISPERING BREEZ DR
 City FISHERS State IN Zip Code 46037
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7308806
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CURTIS, MICHAEL, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 GARDENDALE AVE
 City AKRON State OH Zip Code 44310
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 116.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285972
 Amount of Each Receipt this Period 8.00
 Memo Item

C. CURTIS, MICHAEL, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 GARDENDALE AVE
 City AKRON State OH Zip Code 44310
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 116.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285973
 Amount of Each Receipt this Period 8.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	66.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Davis, Kareem, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7289661
 Amount of Each Receipt this Period 60.00
 Memo Item

B. Davis, Kareem, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7315584
 Amount of Each Receipt this Period 60.00
 Memo Item

C. DAVIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14730 4TH ST #228
 City LAUREL State MD Zip Code 20707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7288610
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Davis, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Morning Breeze Ct
 City Silver Springs State MD Zip Code 20904
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 800.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7282440
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Davis, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Morning Breeze Ct
 City Silver Springs State MD Zip Code 20904
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 800.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7282441
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DAVIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14730 4TH ST #228
 City LAUREL State MD Zip Code 20707
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 325.00

Date of Receipt 10 / 27 / 2017
 Transaction ID : C7311075
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. DAVIS, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14730 4TH ST #228

City LAUREL	State MD	Zip Code 20707
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311076

Amount of Each Receipt this Period
100.00

Memo Item

B. DAVIS, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14730 4TH ST #228

City LAUREL	State MD	Zip Code 20707
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311077

Amount of Each Receipt this Period
100.00

Memo Item

C. Davis, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 208

City Waco	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) National Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7289696

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Davis, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7315583
 Amount of Each Receipt this Period 75.00
 Memo Item

B. DEFIORE, CARA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 MANCHESTER RD
 City SOUTH BELOIT State IL Zip Code 61080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7283778
 Amount of Each Receipt this Period 40.00
 Memo Item

C. DEFIORE, CARA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 MANCHESTER RD
 City SOUTH BELOIT State IL Zip Code 61080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7283779
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. DEFIORE, CARA, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 44 MANCHESTER RD

City SOUTH BELOIT	State IL	Zip Code 61080
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7283780

Amount of Each Receipt this Period
40.00

Memo Item

B. DEFIORE, CARA, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 44 MANCHESTER RD

City SOUTH BELOIT	State IL	Zip Code 61080
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7307946

Amount of Each Receipt this Period
40.00

Memo Item

C. DEFIORE, CARA, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 44 MANCHESTER RD

City SOUTH BELOIT	State IL	Zip Code 61080
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7307947

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 116 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. DEFIORE, CARA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 MANCHESTER RD
 City SOUTH BELOIT State IL Zip Code 61080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307948
 Amount of Each Receipt this Period 40.00
 Memo Item

B. DIECEDUE, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5757 CORPORATE BLVD STE 104
 City BATON ROUGE State LA Zip Code 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282728
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DIECEDUE, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5757 CORPORATE BLVD STE 104
 City BATON ROUGE State LA Zip Code 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282729
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DIECEDUE, JOSEPH, , ,

Mailing Address 5757 CORPORATE BLVD STE 104

City BATON ROUGE	State LA	Zip Code 70808
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7282730

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DIECEDUE, JOSEPH, , ,

Mailing Address 5757 CORPORATE BLVD STE 104

City BATON ROUGE	State LA	Zip Code 70808
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307118

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DIECEDUE, JOSEPH, , ,

Mailing Address 5757 CORPORATE BLVD STE 104

City BATON ROUGE	State LA	Zip Code 70808
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307119

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. DIECEDUE, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5757 CORPORATE BLVD STE 104

City BATON ROUGE	State LA	Zip Code 70808
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2017

Transaction ID : C7307120

Amount of Each Receipt this Period
100.00

Memo Item

B. Diehm, Cindy, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2222 Bull Street Suite 200

City Savannah	State GA	Zip Code 31401
------------------	-------------	-------------------

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

Name of Employer (for Individual) Local 4873	Occupation (for Individual) Exec. Board
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2017

Transaction ID : C7281608

Amount of Each Receipt this Period
100.00

Memo Item

C. Diehm, Cindy, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2222 Bull Street Suite 200

City Savannah	State GA	Zip Code 31401
------------------	-------------	-------------------

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

Name of Employer (for Individual) Local 4873	Occupation (for Individual) Exec. Board
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2017

Transaction ID : C7293795

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Diehm, Cindy, , ,			Date of Receipt MM / DD / YYYY 09 / 05 / 2017		
Mailing Address 2222 Bull Street Suite 200			Transaction ID : C7296628		
City Savannah	State GA	Zip Code 31401	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Local 4873		Occupation (for Individual) Exec. Board	Aggregate Year-to-Date ▼ 1200.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Diehm, Cindy, , ,			Date of Receipt MM / DD / YYYY 10 / 04 / 2017		
Mailing Address 2222 Bull Street Suite 200			Transaction ID : C7301118		
City Savannah	State GA	Zip Code 31401	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Local 4873		Occupation (for Individual) Exec. Board	Aggregate Year-to-Date ▼ 1200.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Diehm, Cindy, , ,			Date of Receipt MM / DD / YYYY 10 / 31 / 2017		
Mailing Address 2222 Bull Street Suite 200			Transaction ID : C7316070		
City Savannah	State GA	Zip Code 31401	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Local 4873		Occupation (for Individual) Exec. Board	Aggregate Year-to-Date ▼ 1200.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Diehm, Cindy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull Street
 Suite 200
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 4873 Occupation (for Individual) Exec. Board
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **12 / 07 / 2017**
Transaction ID : C7329543
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Diermeier, Marlene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8301 Mission Gorge Rd., #313
 City Santee State CA Zip Code 92071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) Bookkeeper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt **07 / 26 / 2017**
Transaction ID : C7289766
 Amount of Each Receipt this Period 8.00
 Memo Item

C. Diermeier, Marlene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8301 Mission Gorge Rd., #313
 City Santee State CA Zip Code 92071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) Bookkeeper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt **08 / 21 / 2017**
Transaction ID : C7296026
 Amount of Each Receipt this Period 8.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	116.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Diermeier, Marlene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8301 Mission Gorge Rd., #313
 City Santee State CA Zip Code 92071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) Bookkeeper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt 09 / 14 / 2017
Transaction ID : C7299431
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Diermeier, Marlene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8301 Mission Gorge Rd., #313
 City Santee State CA Zip Code 92071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) Bookkeeper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt 10 / 23 / 2017
Transaction ID : C7305972
 Amount of Each Receipt this Period 8.00
 Memo Item

C. Diermeier, Marlene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8301 Mission Gorge Rd., #313
 City Santee State CA Zip Code 92071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) Bookkeeper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt 11 / 21 / 2017
Transaction ID : C7325863
 Amount of Each Receipt this Period 8.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	26.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Diermeier, Marlene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8301 Mission Gorge Rd., #313
 City Santee State CA Zip Code 92071
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) Bookkeeper
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 104.00

Date of Receipt 12 / 20 / 2017
 Transaction ID : C7335025
 Amount of Each Receipt this Period 100.00
 Memo Item

B. DIMITROVA, DESI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2286 SLOAN DR
 City LA VERNE State CA Zip Code 91750
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1200.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7282624
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DIMITROVA, DESI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2286 SLOAN DR
 City LA VERNE State CA Zip Code 91750
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1200.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7282625
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. DIMITROVA, DESI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2286 SLOAN DR

City LA VERNE	State CA	Zip Code 91750
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7282626

Amount of Each Receipt this Period

Memo Item

B. DIMITROVA, DESI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2286 SLOAN DR

City LA VERNE	State CA	Zip Code 91750
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307023

Amount of Each Receipt this Period

Memo Item

C. DIMITROVA, DESI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2286 SLOAN DR

City LA VERNE	State CA	Zip Code 91750
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307026

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. DIMITROVA, DESI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2286 SLOAN DR

City LA VERNE	State CA	Zip Code 91750
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7307027

Amount of Each Receipt this Period
100.00

Memo Item

B. DISHONG, JOSHUA, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18526 WILD HORSE CREEK RD

City WILDWOOD	State MO	Zip Code 63005
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7287245

Amount of Each Receipt this Period
100.00

Memo Item

C. DISHONG, JOSHUA, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4899 NORMANDY DR

City GALENA	State OH	Zip Code 43021
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7288953

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 125 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. DISHONG, JOSHUA, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4899 NORMANDY DR
 City GALENA State OH Zip Code 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288954
 Amount of Each Receipt this Period 100.00
 Memo Item

B. DISHONG, JOSHUA, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4899 NORMANDY DR
 City GALENA State OH Zip Code 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311464
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DISHONG, JOSHUA, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4899 NORMANDY DR
 City GALENA State OH Zip Code 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311465
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DISHONG, JOSHUA, E, ,			Date of Receipt												
Mailing Address 4899 NORMANDY DR			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>27</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	10		27		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
10		27		2017											
City GALENA		State OH	Zip Code 43021												
FEC ID number of contributing federal political committee. C			Transaction ID : C7311466												
Name of Employer (for Individual) American Income			Occupation (for Individual) Information Requested												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼													
		500.00													
			Amount of Each Receipt this Period												
			100.00												
			<input type="checkbox"/> Memo Item												

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DOZIER, ERICKA, P, ,			Date of Receipt												
Mailing Address 902 W 4TH ST			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>31</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	07		31		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
07		31		2017											
City WEST PALM BEACH		State FL	Zip Code 33404												
FEC ID number of contributing federal political committee. C			Transaction ID : C7285645												
Name of Employer (for Individual) American Income Life Ins.			Occupation (for Individual) Insurance Agent												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼													
		250.00													
			Amount of Each Receipt this Period												
			25.00												
			<input type="checkbox"/> Memo Item												

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DOZIER, ERICKA, P, ,			Date of Receipt												
Mailing Address 902 W 4TH ST			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>31</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	07		31		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
07		31		2017											
City WEST PALM BEACH		State FL	Zip Code 33404												
FEC ID number of contributing federal political committee. C			Transaction ID : C7285649												
Name of Employer (for Individual) American Income Life Ins.			Occupation (for Individual) Insurance Agent												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼													
		250.00													
			Amount of Each Receipt this Period												
			25.00												
			<input type="checkbox"/> Memo Item												

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. DOZIER, ERICKA, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 902 W 4TH ST
 City WEST PALM BEACH State FL Zip Code 33404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7285650
 Amount of Each Receipt this Period 25.00
 Memo Item

B. DOZIER, ERICKA, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 902 W 4TH ST
 City WEST PALM BEACH State FL Zip Code 33404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7309249
 Amount of Each Receipt this Period 25.00
 Memo Item

C. DOZIER, ERICKA, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 902 W 4TH ST
 City WEST PALM BEACH State FL Zip Code 33404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7309252
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. DOZIER, ERICKA, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 902 W 4TH ST
 City WEST PALM BEACH State FL Zip Code 33404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309253
 Amount of Each Receipt this Period 25.00
 Memo Item

B. DRY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 BRAMBLEWOOD DR
 City DOUGLASSVILLE State PA Zip Code 19518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289193
 Amount of Each Receipt this Period 20.00
 Memo Item

C. DRY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 BRAMBLEWOOD DR
 City DOUGLASSVILLE State PA Zip Code 19518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289194
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 129 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. DRY, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 BRAMBLEWOOD DR

City DOUGLASSVILLE	State PA	Zip Code 19518
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7311708

Amount of Each Receipt this Period

Memo Item

B. DRY, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 BRAMBLEWOOD DR

City DOUGLASSVILLE	State PA	Zip Code 19518
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7311709

Amount of Each Receipt this Period

Memo Item

C. DRY, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 BRAMBLEWOOD DR

City DOUGLASSVILLE	State PA	Zip Code 19518
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7311710

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. DUPLANTIS, MITCHELL, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 COACHMAN COURT

City WILMINGTON	State DE	Zip Code 19803
--------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2017

Transaction ID : C7283155

Amount of Each Receipt this Period
50.00

Memo Item

B. DUPLANTIS, MITCHELL, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 COACHMAN COURT

City WILMINGTON	State DE	Zip Code 19803
--------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2017

Transaction ID : C7283156

Amount of Each Receipt this Period
100.00

Memo Item

C. DUPLANTIS, MITCHELL, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 COACHMAN COURT

City WILMINGTON	State DE	Zip Code 19803
--------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2017

Transaction ID : C7283157

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. DUPLANTIS, MITCHELL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 COACHMAN COURT
 City WILMINGTON State DE Zip Code 19803
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307469
 Amount of Each Receipt this Period 100.00
 Memo Item

B. DUPLANTIS, MITCHELL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 COACHMAN COURT
 City WILMINGTON State DE Zip Code 19803
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307470
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DUPLANTIS, MITCHELL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 COACHMAN COURT
 City WILMINGTON State DE Zip Code 19803
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307471
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. DYER, RICHARD, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 125 N WALNUT AVE #7

City MANTECA	State CA	Zip Code 95337
-----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7283412

Amount of Each Receipt this Period
100.00

Memo Item

B. DYER, RICHARD, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 125 N WALNUT AVE #7

City MANTECA	State CA	Zip Code 95337
-----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7283413

Amount of Each Receipt this Period
100.00

Memo Item

C. DYER, RICHARD, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 125 N WALNUT AVE #7

City MANTECA	State CA	Zip Code 95337
-----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7283414

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 133 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Englehart, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 Isla Vista Dr
 City San Diego State CA Zip Code 92105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSC Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2017
Transaction ID : C7289827
 Amount of Each Receipt this Period
 4.00
 Memo Item

B. Englehart, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 Isla Vista Dr
 City San Diego State CA Zip Code 92105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSC Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2017
Transaction ID : C7289828
 Amount of Each Receipt this Period
 4.00
 Memo Item

C. Englehart, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 Isla Vista Dr
 City San Diego State CA Zip Code 92105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSC Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2017
Transaction ID : C7296034
 Amount of Each Receipt this Period
 8.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	16.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Englehart, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 Isla Vista Dr
 City San Diego State CA Zip Code 92105
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) CSC Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt 09 / 14 / 2017
 Transaction ID : C7299522
 Amount of Each Receipt this Period 4.00
 Memo Item

B. Englehart, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 Isla Vista Dr
 City San Diego State CA Zip Code 92105
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) CSC Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt 09 / 14 / 2017
 Transaction ID : C7299523
 Amount of Each Receipt this Period 4.00
 Memo Item

C. Englehart, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 Isla Vista Dr
 City San Diego State CA Zip Code 92105
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) CSC Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt 10 / 23 / 2017
 Transaction ID : C7306061
 Amount of Each Receipt this Period 4.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	12.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Englehart, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 Isla Vista Dr
 City San Diego State CA Zip Code 92105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSC Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2017
Transaction ID : C7306062
 Amount of Each Receipt this Period
 4.00
 Memo Item

B. Englehart, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 Isla Vista Dr
 City San Diego State CA Zip Code 92105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSC Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2017
Transaction ID : C7325933
 Amount of Each Receipt this Period
 4.00
 Memo Item

C. Englehart, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 Isla Vista Dr
 City San Diego State CA Zip Code 92105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSC Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2017
Transaction ID : C7325934
 Amount of Each Receipt this Period
 4.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	12.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Englehart, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 Isla Vista Dr
 City San Diego State CA Zip Code 92105
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) CSC Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt 11 / 21 / 2017
Transaction ID : C7325997
 Amount of Each Receipt this Period 4.00
 Memo Item

B. Englehart, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 Isla Vista Dr
 City San Diego State CA Zip Code 92105
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) CSC Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt 12 / 20 / 2017
Transaction ID : C7334809
 Amount of Each Receipt this Period 4.00
 Memo Item

C. Englehart, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 Isla Vista Dr
 City San Diego State CA Zip Code 92105
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) CSC Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt 12 / 20 / 2017
Transaction ID : C7334810
 Amount of Each Receipt this Period 4.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	12.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Engler, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 Valley Vista Way
 City Oceanside State CA Zip Code 92054
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU Local 30 Occupation (for Individual) member at large
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 07 / 26 / 2017
Transaction ID : C7289768
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Engler, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 Valley Vista Way
 City Oceanside State CA Zip Code 92054
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU Local 30 Occupation (for Individual) member at large
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 09 / 14 / 2017
Transaction ID : C7299432
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Engler, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 Valley Vista Way
 City Oceanside State CA Zip Code 92054
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU Local 30 Occupation (for Individual) member at large
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 10 / 23 / 2017
Transaction ID : C7305973
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Engler, Catherine, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2811 Valley Vista Way

City Oceanside	State CA	Zip Code 92054
-------------------	-------------	-------------------

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

Name of Employer (for Individual) OPEIU Local 30	Occupation (for Individual) member at large
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2017

Transaction ID : C7335027

Amount of Each Receipt this Period
20.00

Memo Item

B. Engrav, Steven, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 108 11th AVENUE NW

City Waukon	State IA	Zip Code 52172
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7282019

Amount of Each Receipt this Period
10.00

Memo Item

C. Engrav, Steven, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 108 11th AVENUE NW

City Waukon	State IA	Zip Code 52172
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7282020

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Engrav, Steven, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 11th AVENUE NW
 City Waukon State IA Zip Code 52172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282021
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Engrav, Steven, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 11th AVENUE NW
 City Waukon State IA Zip Code 52172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306454
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Engrav, Steven, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 11th AVENUE NW
 City Waukon State IA Zip Code 52172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306455
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Engrav, Steven, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 11th AVENUE NW
 City Waukon State IA Zip Code 52172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306456
 Amount of Each Receipt this Period 100.00
 Memo Item

B. EZERNACK, DEBBIE, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3306 KINGSFORD PL
 City BOSSIER CITY State LA Zip Code 71112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7284443
 Amount of Each Receipt this Period 100.00
 Memo Item

C. EZERNACK, DEBBIE, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3306 KINGSFORD PL
 City BOSSIER CITY State LA Zip Code 71112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7284444
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. EZERNACK, DEBBIE, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3306 KINGSFORD PL

City BOSSIER CITY	State LA	Zip Code 71112
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284445

Amount of Each Receipt this Period
50.00

Memo Item

B. EZERNACK, DEBBIE, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3306 KINGSFORD PL

City BOSSIER CITY	State LA	Zip Code 71112
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7308433

Amount of Each Receipt this Period
100.00

Memo Item

C. EZERNACK, DEBBIE, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3306 KINGSFORD PL

City BOSSIER CITY	State LA	Zip Code 71112
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7308434

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. EZERNACK, DEBBIE, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3306 KINGSFORD PL

City BOSSIER CITY	State LA	Zip Code 71112
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7308435

Amount of Each Receipt this Period
100.00

Memo Item

B. Farenthold, George, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Jed Morgan House, PO Box 401

City Aurora	State NY	Zip Code 13026
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7289441

Amount of Each Receipt this Period
30.00

Memo Item

C. Farenthold, George, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Jed Morgan House, PO Box 401

City Aurora	State NY	Zip Code 13026
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7315763

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Farm, Elizabeth S, , ,			Date of Receipt MM / DD / YYYY 07 / 31 / 2017 Transaction ID : C7289443		
Mailing Address 1033 Autumn Oaks Cir			Amount of Each Receipt this Period 60.00		
City Collierville	State TN	Zip Code 38017	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 240.00		
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Farm, Elizabeth S, , ,			Date of Receipt MM / DD / YYYY 10 / 27 / 2017 Transaction ID : C7315770		
Mailing Address 1033 Autumn Oaks Cir			Amount of Each Receipt this Period 60.00		
City Collierville	State TN	Zip Code 38017	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 240.00		
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FEARON, MABEL, , ,			Date of Receipt MM / DD / YYYY 07 / 31 / 2017 Transaction ID : C7289725		
Mailing Address PO Box 208			Amount of Each Receipt this Period 100.00		
City Waco	State TX	Zip Code 76703	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 200.00		
Name of Employer (for Individual) National Income Life		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. FELDMANN, GABRIEL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6014 LANCASTER CT
 City MILTON State FL Zip Code 32571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 902.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285625
 Amount of Each Receipt this Period 100.00
 Memo Item

B. FELDMANN, GABRIEL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6014 LANCASTER CT
 City MILTON State FL Zip Code 32571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 902.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285626
 Amount of Each Receipt this Period 100.00
 Memo Item

C. FELDMANN, GABRIEL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6014 LANCASTER CT
 City MILTON State FL Zip Code 32571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 902.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285627
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. FELDMANN, GABRIEL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6014 LANCASTER CT
 City MILTON State FL Zip Code 32571
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 902.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309231
 Amount of Each Receipt this Period 100.00
 Memo Item

B. FELDMANN, GABRIEL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6014 LANCASTER CT
 City MILTON State FL Zip Code 32571
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 902.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309235
 Amount of Each Receipt this Period 100.00
 Memo Item

C. FELDMANN, GABRIEL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6014 LANCASTER CT
 City MILTON State FL Zip Code 32571
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 902.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309236
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 146 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. FISCHER, NICOLE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9474 FORBES FIELD CT
 City LAS VEGAS State NV Zip Code 89148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288944
 Amount of Each Receipt this Period 20.00
 Memo Item

B. FISCHER, NICOLE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9474 FORBES FIELD CT
 City LAS VEGAS State NV Zip Code 89148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288945
 Amount of Each Receipt this Period 20.00
 Memo Item

C. FISCHER, NICOLE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 168 CONEY ISLAND AVE
 City LAS VEGAS State NV Zip Code 89123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285935
 Amount of Each Receipt this Period 20.00
 Memo Item

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

60.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. FISCHER, NICOLE, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9474 FORBES FIELD CT

City LAS VEGAS	State NV	Zip Code 89148
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2017

Transaction ID : C7311449

Amount of Each Receipt this Period
20.00

Memo Item

B. FISCHER, NICOLE, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9474 FORBES FIELD CT

City LAS VEGAS	State NV	Zip Code 89148
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2017

Transaction ID : C7311450

Amount of Each Receipt this Period
20.00

Memo Item

C. FISCHER, NICOLE, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9474 FORBES FIELD CT

City LAS VEGAS	State NV	Zip Code 89148
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2017

Transaction ID : C7311451

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 148 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. FISHER, KRISTOPHER, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1442 N CHERRY ST
 City CHICO State CA Zip Code 95926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 105.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7312198
 Amount of Each Receipt this Period 35.00
 Memo Item

B. FISHER, KRISTOPHER, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1442 N CHERRY ST
 City CHICO State CA Zip Code 95926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 105.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7312199
 Amount of Each Receipt this Period 35.00
 Memo Item

C. FISHER, KRISTOPHER, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1442 N CHERRY ST
 City CHICO State CA Zip Code 95926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 105.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7312200
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Fisher, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 Black Bear Dr #1228
 City Waltham State MA Zip Code 02451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.03

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288603
 Amount of Each Receipt this Period 41.67
 Memo Item

B. Fisher, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 Black Bear Dr #1228
 City Waltham State MA Zip Code 02451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.03

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288604
 Amount of Each Receipt this Period 41.67
 Memo Item

C. Fisher, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 Black Bear Dr #1228
 City Waltham State MA Zip Code 02451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.03

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288605
 Amount of Each Receipt this Period 41.67
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.01
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FISHER, LAURA, , ,			Date of Receipt
Mailing Address 44 BLACK BEAR DR #1228			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City Waltham	State MA	Zip Code 02451	Transaction ID : C7313730
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="41.67"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="125.01"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FISHER, LAURA, , ,			Date of Receipt
Mailing Address 44 BLACK BEAR DR #1228			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City Waltham	State MA	Zip Code 02451	Transaction ID : C7313731
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="41.67"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="125.01"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FISHER, LAURA, , ,			Date of Receipt
Mailing Address 44 BLACK BEAR DR #1228			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City Waltham	State MA	Zip Code 02451	Transaction ID : C7313732
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="41.67"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="125.01"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="125.01"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Foley, Patrica Jean, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9411 Gold Hill

City San Antonio	State TX	Zip Code 78245
---------------------	-------------	-------------------

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

Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Assistant Rep.
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2017

Transaction ID : C7281614

Amount of Each Receipt this Period
25.00

Memo Item

B. Foley, Patrica Jean, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9411 Gold Hill

City San Antonio	State TX	Zip Code 78245
---------------------	-------------	-------------------

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

Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Assistant Rep.
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2017

Transaction ID : C7293801

Amount of Each Receipt this Period
25.00

Memo Item

C. Foley, Patrica Jean, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9411 Gold Hill

City San Antonio	State TX	Zip Code 78245
---------------------	-------------	-------------------

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

Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Assistant Rep.
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2017

Transaction ID : C7296629

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Foley, Patrica Jean, , ,		Date of Receipt MM / DD / YYYY 10 / 04 / 2017
Mailing Address 9411 Gold Hill		Transaction ID : C7301119
City San Antonio	State TX	Zip Code 78245
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Assistant Rep.	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Foley, Patrica Jean, , ,		Date of Receipt MM / DD / YYYY 10 / 31 / 2017
Mailing Address 9411 Gold Hill		Transaction ID : C7316071
City San Antonio	State TX	Zip Code 78245
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Assistant Rep.	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Foley, Patrica Jean, , ,		Date of Receipt MM / DD / YYYY 12 / 07 / 2017
Mailing Address 9411 Gold Hill		Transaction ID : C7329554
City San Antonio	State TX	Zip Code 78245
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Assistant Rep.	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 153 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. FOSS, NATHANIEL, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 BLOSSOM ST # 3
 City Leominster State MA Zip Code 01453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 140.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285749
 Amount of Each Receipt this Period 20.00
 Memo Item

B. FOSS, NATHANIEL, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 BLOSSOM ST # 3
 City Leominster State MA Zip Code 01453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 140.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285750
 Amount of Each Receipt this Period 20.00
 Memo Item

C. FOTI, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2500
 City NAPA State CA Zip Code 94558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7283264
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
FOTI, DONALD, , ,

Mailing Address PO BOX 2500

City NAPA	State CA	Zip Code 94558
--------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7283265

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
FOTI, DONALD, , ,

Mailing Address PO BOX 2500

City NAPA	State CA	Zip Code 94558
--------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7283269

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
FOTI, DONALD, , ,

Mailing Address PO BOX 2500

City NAPA	State CA	Zip Code 94558
--------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307566

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="600.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. FOTI, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2500
 City NAPA State CA Zip Code 94558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307567
 Amount of Each Receipt this Period 200.00
 Memo Item

B. FOTI, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2500
 City NAPA State CA Zip Code 94558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307569
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Francis, Shaun, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Meadow Lake Dr.
 City Cohess State NY Zip Code 12047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 322 Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 07 / 20 / 2017
Transaction ID : C7281498
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	410.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 156 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Francis, Shaun, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Meadow Lake Dr.
 City Cohess State NY Zip Code 12047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 322 Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 08 / 18 / 2017
Transaction ID : C7295919
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Francis, Shaun, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Meadow Lake Dr.
 City Cohess State NY Zip Code 12047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 322 Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 09 / 14 / 2017
Transaction ID : C7298611
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Francis, Shaun, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Meadow Lake Dr.
 City Cohess State NY Zip Code 12047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 322 Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 10 / 23 / 2017
Transaction ID : C7305946
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 35.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Francis, Shaun, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2017		
Mailing Address 17 Meadow Lake Dr.			Transaction ID : C7316373		
City Cohess	State NY	Zip Code 12047	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU Local 322		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 170.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Francis, Shaun, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2017		
Mailing Address 17 Meadow Lake Dr.			Transaction ID : C7325638		
City Cohess	State NY	Zip Code 12047	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU Local 322		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 170.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Francis, Shaun, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2017		
Mailing Address 17 Meadow Lake Dr.			Transaction ID : C7330230		
City Cohess	State NY	Zip Code 12047	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU Local 322		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 170.00			

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 158 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Fuldauer, Susan, , ,			Date of Receipt MM / DD / YYYY 07 / 31 / 2017
Mailing Address 7229 Kingman Cir			Transaction ID : C7289446
City Indianapolis	State IN	Zip Code 46256	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fuldauer, Susan, , ,			Date of Receipt MM / DD / YYYY 10 / 27 / 2017
Mailing Address 7229 Kingman Cir			Transaction ID : C7315758
City Indianapolis	State IN	Zip Code 46256	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FUNG, ROGER, X, ,			Date of Receipt MM / DD / YYYY 07 / 31 / 2017
Mailing Address 7121 SHELTER CREEK LN			Transaction ID : C7283695
City SAN BRUNO	State CA	Zip Code 94066	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Income Life Insurance		Occupation (for Individual) AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1050.00	

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. FUNG, ROGER, X, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7121 SHELTER CREEK LN

City SAN BRUNO	State CA	Zip Code 94066
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7283696

Amount of Each Receipt this Period

Memo Item

B. FUNG, ROGER, X, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7121 SHELTER CREEK LN

City SAN BRUNO	State CA	Zip Code 94066
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7283697

Amount of Each Receipt this Period

Memo Item

C. FUNG, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1025 SHELL BLVD #5

City FOSTER CITY	State CA	Zip Code 94404
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7312110

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FUNG, ROGER, X, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017
Mailing Address 7121 SHELTER CREEK LN		Transaction ID : C7307893
City SAN BRUNO	State CA	Zip Code 94066
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FUNG, ROGER, X, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017
Mailing Address 7121 SHELTER CREEK LN		Transaction ID : C7307894
City SAN BRUNO	State CA	Zip Code 94066
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FURER, CINDY, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017
Mailing Address 10771 SANTA TOMASA AVE		Transaction ID : C7283394
City SAN DIEGO	State CA	Zip Code 92127
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1800.00	

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 161 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. FURER, CINDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10771 SANTA TOMASA AVE

City SAN DIEGO	State CA	Zip Code 92127
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7283395

Amount of Each Receipt this Period

Memo Item

B. FURER, CINDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10771 SANTA TOMASA AVE

City SAN DIEGO	State CA	Zip Code 92127
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7283396

Amount of Each Receipt this Period

Memo Item

C. FURER, CINDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10771 SANTA TOMASA AVE

City SAN DIEGO	State CA	Zip Code 92127
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307681

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. FURER, CINDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10771 SANTA TOMASA AVE

City SAN DIEGO	State CA	Zip Code 92127
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307682

Amount of Each Receipt this Period

Memo Item

B. FURER, CINDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10771 SANTA TOMASA AVE

City SAN DIEGO	State CA	Zip Code 92127
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307683

Amount of Each Receipt this Period

Memo Item

C. GAGLIARDI, MARK, S, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1345 YOSEMITE CIR

City OAKLEY	State CA	Zip Code 94561
----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) National Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7282511

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="320.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. GAGLIARDI, MARK, S, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1345 YOSEMITE CIR

City OAKLEY	State CA	Zip Code 94561
----------------	-------------	-------------------

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

Name of Employer (for Individual) National Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282512

Amount of Each Receipt this Period
20.00

Memo Item

B. GAGLIARDI, MARK, S, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1345 YOSEMITE CIR

City OAKLEY	State CA	Zip Code 94561
----------------	-------------	-------------------

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

Name of Employer (for Individual) National Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282513

Amount of Each Receipt this Period
20.00

Memo Item

C. GAGLIARDI, MARK, S, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1345 YOSEMITE CIR

City OAKLEY	State CA	Zip Code 94561
----------------	-------------	-------------------

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

Name of Employer (for Individual) National Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7306908

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. GAGLIARDI, MARK, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1345 YOSEMITE CIR
 City OAKLEY State CA Zip Code 94561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306909
 Amount of Each Receipt this Period 20.00
 Memo Item

B. GAGLIARDI, MARK, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1345 YOSEMITE CIR
 City OAKLEY State CA Zip Code 94561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306910
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Giddens, Larry, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 Somerton Dr
 City Montgomery State TX Zip Code 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282505
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Giddens, Larry, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 Somerton Dr
 City Montgomery State TX Zip Code 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282506
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Giddens, Larry, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 Somerton Dr
 City Montgomery State TX Zip Code 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282507
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Giddens, Larry, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 Somerton Dr
 City Montgomery State TX Zip Code 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306902
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Giddens, Larry, R, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017
Mailing Address 44 Somerton Dr			Transaction ID : C7306903
City Montgomery	State TX	Zip Code 77356	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Income Life Insurance		Occupation (for Individual) Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Giddens, Larry, R, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017
Mailing Address 44 Somerton Dr			Transaction ID : C7306904
City Montgomery	State TX	Zip Code 77356	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Income Life Insurance		Occupation (for Individual) Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GIGLIONE, ERIC, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017
Mailing Address PO BOX 208			Transaction ID : C7285333
City WACO	State TX	Zip Code 76703	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Income		Occupation (for Individual) agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 4800.00	

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. GIGLIONE, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 208
 City WACO State TX Zip Code 76703
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7285334
 Amount of Each Receipt this Period 400.00
 Memo Item

B. GIGLIONE, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 208
 City WACO State TX Zip Code 76703
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7285335
 Amount of Each Receipt this Period 400.00
 Memo Item

C. GIGLIONE, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 208
 City WACO State TX Zip Code 76703
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 10 / 27 / 2017
 Transaction ID : C7309061
 Amount of Each Receipt this Period 400.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. GIGLIONE, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 208

City WACO	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309062

Amount of Each Receipt this Period
400.00

Memo Item

B. GIGLIONE, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 208

City WACO	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309063

Amount of Each Receipt this Period
400.00

Memo Item

C. GILBERT, DENISE, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 208

City Waco	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7289447

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GILBERT, DENISE, E, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address PO Box 208			Transaction ID : C7315778		
City Waco	State TX	Zip Code 76703	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Giordano, Marianne, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 21 / 2017		
Mailing Address 5585 Brunswick Ave			Transaction ID : C7296046		
City San Diego	State CA	Zip Code 92120	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU Local 30		Occupation (for Individual) President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 190.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Giordano, Marianne, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 14 / 2017		
Mailing Address 5585 Brunswick Ave			Transaction ID : C7299433		
City San Diego	State CA	Zip Code 92120	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU Local 30		Occupation (for Individual) President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 190.00			

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Giordano, Marianne, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2017
Mailing Address 5585 Brunswick Ave		Transaction ID : C7325540
City San Diego	State CA	Zip Code 92120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer (for Individual) OPEIU Local 30	Occupation (for Individual) President	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Giordano, Marianne, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2017
Mailing Address 5585 Brunswick Ave		Transaction ID : C7335029
City San Diego	State CA	Zip Code 92120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer (for Individual) OPEIU Local 30	Occupation (for Individual) President	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GOLESKI, NICOLE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017
Mailing Address PO Box 208		Transaction ID : C7289674
City Waco	State TX	Zip Code 76703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) National Income Life	Occupation (for Individual) Insurance Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 120.00	

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GOLESKI, NICOLE, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017 Transaction ID : C7315595		
Mailing Address PO Box 208			Amount of Each Receipt this Period 30.00		
City Waco	State TX	Zip Code 76703	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) National Income Life		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 120.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Goodman, Joshua, B, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017 Transaction ID : C7282400		
Mailing Address 14009 West 30Th Ln			Amount of Each Receipt this Period 20.00		
City Golden	State CO	Zip Code 80401	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) American Income Life Ins.		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Goodman, Joshua, B, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017 Transaction ID : C7282401		
Mailing Address 14009 West 30Th Ln			Amount of Each Receipt this Period 20.00		
City Golden	State CO	Zip Code 80401	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) American Income Life Ins.		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 240.00			

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Goodman, Joshua, B, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14009 West 30Th Ln

City Golden	State CO	Zip Code 80401
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282402

Amount of Each Receipt this Period
20.00

Memo Item

B. Goodman, Joshua, B, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14009 West 30Th Ln

City Golden	State CO	Zip Code 80401
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7306806

Amount of Each Receipt this Period
20.00

Memo Item

C. Goodman, Joshua, B, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14009 West 30Th Ln

City Golden	State CO	Zip Code 80401
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7306807

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Goodman, Joshua, B, ,

Mailing Address 14009 West 30Th Ln

City Golden	State CO	Zip Code 80401
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7306808

Amount of Each Receipt this Period
20.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Gschwend, Kelly, , ,

Mailing Address 943 ELM DRIVE

City Rodeo	State CA	Zip Code 94572
---------------	-------------	-------------------

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

Name of Employer (for Individual) LOCAL 29	Occupation (for Individual) ORGANIZER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2017

Transaction ID : C7281414

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Gschwend, Kelly, , ,

Mailing Address 943 ELM DRIVE

City Rodeo	State CA	Zip Code 94572
---------------	-------------	-------------------

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

Name of Employer (for Individual) LOCAL 29	Occupation (for Individual) ORGANIZER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2017

Transaction ID : C7289744

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Gschwend, Kelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 943 ELM DRIVE
 City Rodeo State CA Zip Code 94572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 29 Occupation (for Individual) ORGANIZER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt **08 / 16 / 2017**
Transaction ID : C7294140
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Gschwend, Kelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 943 ELM DRIVE
 City Rodeo State CA Zip Code 94572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 29 Occupation (for Individual) ORGANIZER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt **09 / 14 / 2017**
Transaction ID : C7298552
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Gschwend, Kelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 943 ELM DRIVE
 City Rodeo State CA Zip Code 94572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 29 Occupation (for Individual) ORGANIZER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt **10 / 23 / 2017**
Transaction ID : C7305965
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gschwend, Kelly, , ,

Mailing Address 943 ELM DRIVE

City Rodeo	State CA	Zip Code 94572
---------------	-------------	-------------------

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

Name of Employer (for Individual) LOCAL 29	Occupation (for Individual) ORGANIZER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2017

Transaction ID : C7316327

Amount of Each Receipt this Period
40.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gschwend, Kelly, , ,

Mailing Address 943 ELM DRIVE

City Rodeo	State CA	Zip Code 94572
---------------	-------------	-------------------

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

Name of Employer (for Individual) LOCAL 29	Occupation (for Individual) ORGANIZER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2017

Transaction ID : C7325526

Amount of Each Receipt this Period
40.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gschwend, Kelly, , ,

Mailing Address 943 ELM DRIVE

City Rodeo	State CA	Zip Code 94572
---------------	-------------	-------------------

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

Name of Employer (for Individual) LOCAL 29	Occupation (for Individual) ORGANIZER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2017

Transaction ID : C7329442

Amount of Each Receipt this Period
20.00

Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Gschwend, Kelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 943 ELM DRIVE
 City Rodeo State CA Zip Code 94572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 29 Occupation (for Individual) ORGANIZER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2017
Transaction ID : C7334645
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HAIRSTON, CATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5401 SUNFIELD DR
 City CHARLOTTE State NC Zip Code 28215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7283476
 Amount of Each Receipt this Period 28.00
 Memo Item

C. HAIRSTON, CATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5401 SUNFIELD DR
 City CHARLOTTE State NC Zip Code 28215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7283477
 Amount of Each Receipt this Period 28.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	106.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. HAIRSTON, CATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5401 SUNFIELD DR
 City CHARLOTTE State NC Zip Code 28215
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 336.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7283478
 Amount of Each Receipt this Period 28.00
 Memo Item

B. HAIRSTON, CATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5401 SUNFIELD DR
 City CHARLOTTE State NC Zip Code 28215
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 336.00

Date of Receipt 10 / 27 / 2017
 Transaction ID : C7307734
 Amount of Each Receipt this Period 28.00
 Memo Item

C. HAIRSTON, CATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5401 SUNFIELD DR
 City CHARLOTTE State NC Zip Code 28215
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 336.00

Date of Receipt 10 / 27 / 2017
 Transaction ID : C7307735
 Amount of Each Receipt this Period 28.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	84.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. HAIRSTON, CATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5401 SUNFIELD DR
 City CHARLOTTE State NC Zip Code 28215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307736
 Amount of Each Receipt this Period 28.00
 Memo Item

B. HAMMETT, JOSHUA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1835 SANDY CROSS RD
 City NASHVILLE State NC Zip Code 27856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7314301
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HAMMETT, JOSHUA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1835 SANDY CROSS RD
 City NASHVILLE State NC Zip Code 27856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7314302
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	128.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Hammond, KADIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 140.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7289723
 Amount of Each Receipt this Period
 60.00
 Memo Item

B. Hammond, KADIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 140.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7315697
 Amount of Each Receipt this Period
 60.00
 Memo Item

C. Hancock, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12546 Walnut Ridge PI
 City Fishers State IN Zip Code 46038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN INCOME LIFE INS. CO. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7282046
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Hancock, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12546 Walnut Ridge Pl
 City Fishers State IN Zip Code 46038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN INCOME LIFE INS. CO. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7282047
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Hancock, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12546 Walnut Ridge Pl
 City Fishers State IN Zip Code 46038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN INCOME LIFE INS. CO. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7282048
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Hancock, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12546 Walnut Ridge Pl
 City Fishers State IN Zip Code 46038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN INCOME LIFE INS. CO. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7306477
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 181 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Hancock, Mark, , ,		Date of Receipt
Mailing Address 12546 Walnut Ridge Pl		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City Fishers	State IN	Zip Code 46038
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7306478
Name of Employer (for Individual) AMERICAN INCOME LIFE INS. CO.		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) Insurance Agent		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1100.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hardy, Lillian, , ,		Date of Receipt
Mailing Address 5707 Woodwind Dr.		<input type="text" value="07"/> / <input type="text" value="20"/> / <input type="text" value="2017"/>
City Bloomfield Hills	State MI	Zip Code 48301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7281424
Name of Employer (for Individual) Local 42		Amount of Each Receipt this Period <input type="text" value="35.00"/>
Occupation (for Individual) Executive Secretary		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hardy, Lillian, , ,		Date of Receipt
Mailing Address 5707 Woodwind Dr.		<input type="text" value="08"/> / <input type="text" value="04"/> / <input type="text" value="2017"/>
City Bloomfield Hills	State MI	Zip Code 48301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7293587
Name of Employer (for Individual) Local 42		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Occupation (for Individual) Executive Secretary		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="155.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Hardy, Lillian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5707 Woodwind Dr.
 City Bloomfield Hills State MI Zip Code 48301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 42 Occupation (for Individual) Executive Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **09 / 08 / 2017**
Transaction ID : C7296739
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Hardy, Lillian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5707 Woodwind Dr.
 City Bloomfield Hills State MI Zip Code 48301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 42 Occupation (for Individual) Executive Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **10 / 04 / 2017**
Transaction ID : C7301083
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Hardy, Lillian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5707 Woodwind Dr.
 City Bloomfield Hills State MI Zip Code 48301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 42 Occupation (for Individual) Executive Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **11 / 09 / 2017**
Transaction ID : C7316333
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 183 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Hardy, Lillian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5707 Woodwind Dr.
 City Bloomfield Hills State MI Zip Code 48301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 42 Occupation (for Individual) Executive Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 07 / 2017
Transaction ID : C7329515
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Hardy, Lillian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5707 Woodwind Dr.
 City Bloomfield Hills State MI Zip Code 48301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 42 Occupation (for Individual) Executive Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2017
Transaction ID : C7335365
 Amount of Each Receipt this Period 20.00
 Memo Item

C. HART, MATHEW, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8843 W RANCH RD
 City TRACY State CA Zip Code 95376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282936
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HART, MATHEW, R, ,

Mailing Address 8843 W RANCH RD

City TRACY	State CA	Zip Code 95376
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7282937

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HART, MATHEW, R, ,

Mailing Address 8843 W RANCH RD

City TRACY	State CA	Zip Code 95376
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7282938

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HART, MATHEW, R, ,

Mailing Address 8843 W RANCH RD

City TRACY	State CA	Zip Code 95376
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307296

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. HART, MATHEW, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8843 W RANCH RD

City TRACY	State CA	Zip Code 95376
---------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7307300

Amount of Each Receipt this Period
100.00

Memo Item

B. HART, MATHEW, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8843 W RANCH RD

City TRACY	State CA	Zip Code 95376
---------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7307301

Amount of Each Receipt this Period
100.00

Memo Item

C. HART, ZACHARY, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3341 Grantham Ct

City Oakland	State MI	Zip Code 48363-2377
-----------------	-------------	------------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284470

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HART, ZACHARY, T, ,

Mailing Address 3341 Grantham Ct

City Oakland	State MI	Zip Code 48363-2377
-----------------	-------------	------------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284471

Amount of Each Receipt this Period
300.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HART, ZACHARY, T, ,

Mailing Address 3341 Grantham Ct

City Oakland	State MI	Zip Code 48363-2377
-----------------	-------------	------------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284472

Amount of Each Receipt this Period
300.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HART, ZACHARY, T, ,

Mailing Address 3341 Grantham Ct

City Oakland	State MI	Zip Code 48363-2377
-----------------	-------------	------------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7308449

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. HART, ZACHARY, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3341 Grantham Ct

City Oakland	State MI	Zip Code 48363-2377
-----------------	-------------	------------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7308450

Amount of Each Receipt this Period
300.00

Memo Item

B. HART, ZACHARY, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3341 Grantham Ct

City Oakland	State MI	Zip Code 48363-2377
-----------------	-------------	------------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7308451

Amount of Each Receipt this Period
300.00

Memo Item

C. HAUSMAN, DAVID, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 RIDGEVIEW CT

City Ringoos	State NJ	Zip Code 08551
-----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7288857

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. HAUSMAN, DAVID, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 RIDGEVIEW CT
 City Ringoes State NJ Zip Code 08551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288858
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HAUSMAN, DAVID, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 RIDGEVIEW CT
 City Ringoes State NJ Zip Code 08551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288859
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HAUSMAN, DAVID, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 RIDGEVIEW CT
 City Ringoes State NJ Zip Code 08551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7314337
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. HAUSMAN, DAVID, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 RIDGEVIEW CT
 City Ringoes State NJ Zip Code 08551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7314338
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HAUSMAN, DAVID, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 RIDGEVIEW CT
 City Ringoes State NJ Zip Code 08551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7314339
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HAY, ROB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 208
 City WACO State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285336
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 190 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. HAY, ROB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 208**

City WACO	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
07 / 31 / 2017

Transaction ID : C7285337

Amount of Each Receipt this Period
250.00

Memo Item

B. HAY, ROB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 208**

City WACO	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
07 / 31 / 2017

Transaction ID : C7285338

Amount of Each Receipt this Period
250.00

Memo Item

C. HAY, ROB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 208**

City WACO	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
10 / 27 / 2017

Transaction ID : C7309064

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. HAY, ROB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 208**
 City **WACO** State **TX** Zip Code **76703**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **American Income** Occupation (for Individual) **agent**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7309065
 Amount of Each Receipt this Period **250.00**
 Memo Item

B. HAY, ROB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 208**
 City **WACO** State **TX** Zip Code **76703**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **American Income** Occupation (for Individual) **agent**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7309066
 Amount of Each Receipt this Period **250.00**
 Memo Item

C. Headrick, Billie Faye, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **3935 Hamill Rd**
 City **Hixson** State **TN** Zip Code **37343-3516**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **OPEIU** Occupation (for Individual) **Representative**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ **340.00**

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281469
 Amount of Each Receipt this Period **40.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	540.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Headrick, Billie Faye, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3935 Hamill Rd
 City Hixson State TN Zip Code 37343-3516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Occupation (for Individual) Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **08 / 18 / 2017**
Transaction ID : C7295921
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Henderson, Matt, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1235 Snug Harbor Dr
 City Casselberry State FL Zip Code 32707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2950.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282419
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Henderson, Matt, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1235 Snug Harbor Dr
 City Casselberry State FL Zip Code 32707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2950.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282420
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	490.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Henderson, Matt, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1235 Snug Harbor Dr
 City Casselberry State FL Zip Code 32707
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2950.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7282421
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Henderson, Matt, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1235 Snug Harbor Dr
 City Casselberry State FL Zip Code 32707
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2950.00

Date of Receipt 10 / 27 / 2017
 Transaction ID : C7306821
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Henderson, Matt, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1235 Snug Harbor Dr
 City Casselberry State FL Zip Code 32707
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2950.00

Date of Receipt 10 / 27 / 2017
 Transaction ID : C7306822
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Henderson, Matt, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1235 Snug Harbor Dr

City Casselberry	State FL	Zip Code 32707
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7306826

Amount of Each Receipt this Period
250.00

Memo Item

B. Herbert, Cindy, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 120 Monument Circle

City Indianapolis	State IN	Zip Code 46204
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
130.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2017

Transaction ID : C7281420

Amount of Each Receipt this Period
5.00

Memo Item

C. Herbert, Cindy, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 120 Monument Circle

City Indianapolis	State IN	Zip Code 46204
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
130.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2017

Transaction ID : C7289731

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	260.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Herbert, Cindy, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Monument Circle
 City Indianapolis State IN Zip Code 46204
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 130.00

Date of Receipt 08 / 04 / 2017
 Transaction ID : C7293806
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Herbert, Cindy, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Monument Circle
 City Indianapolis State IN Zip Code 46204
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 130.00

Date of Receipt 08 / 21 / 2017
 Transaction ID : C7295907
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Herbert, Cindy, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Monument Circle
 City Indianapolis State IN Zip Code 46204
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 130.00

Date of Receipt 09 / 18 / 2017
 Transaction ID : C7298596
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Herbert, Cindy, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Monument Circle
 City Indianapolis State IN Zip Code 46204
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt 09 / 26 / 2017
Transaction ID : C7300431
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Herbert, Cindy, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Monument Circle
 City Indianapolis State IN Zip Code 46204
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt 10 / 04 / 2017
Transaction ID : C7301106
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Herbert, Cindy, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Monument Circle
 City Indianapolis State IN Zip Code 46204
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt 10 / 23 / 2017
Transaction ID : C7305904
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Herbert, Cindy, L, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2017
Mailing Address 120 Monument Circle		Transaction ID : C7315995
City Indianapolis	State IN	Zip Code 46204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 130.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Herbert, Cindy, L, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 17 / 2017
Mailing Address 120 Monument Circle		Transaction ID : C7325836
City Indianapolis	State IN	Zip Code 46204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 130.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Herbert, Cindy, L, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2017
Mailing Address 120 Monument Circle		Transaction ID : C7326444
City Indianapolis	State IN	Zip Code 46204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 130.00	

SUBTOTAL of Receipts This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Herbert, Cindy, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Monument Circle
 City Indianapolis State IN Zip Code 46204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt 12 / 12 / 2017
Transaction ID : C7334651
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Herbert, Cindy, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Monument Circle
 City Indianapolis State IN Zip Code 46204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt 12 / 27 / 2017
Transaction ID : C7335362
 Amount of Each Receipt this Period 5.00
 Memo Item

C. HERNANDEZ, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2840 N PROSPECT AVE
 City MILWAUKEE State WI Zip Code 53211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 American Income Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7283013
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERNANDEZ, CHRISTOPHER, , ,

Mailing Address 2840 N PROSPECT AVE

City MILWAUKEE	State WI	Zip Code 53211
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7283014

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERNANDEZ, CHRISTOPHER, , ,

Mailing Address 2840 N PROSPECT AVE

City MILWAUKEE	State WI	Zip Code 53211
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7283015

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERNANDEZ, CHRISTOPHER, , ,

Mailing Address 2840 N PROSPECT AVE

City MILWAUKEE	State WI	Zip Code 53211
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307363

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. HERNANDEZ, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2840 N PROSPECT AVE
 City MILWAUKEE State WI Zip Code 53211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307367
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HERNANDEZ, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2840 N PROSPECT AVE
 City MILWAUKEE State WI Zip Code 53211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307368
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Hill, Charles, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 Miwok Dr
 City Lodi State CA Zip Code 95240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282049
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Hill, Charles, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 Miwok Dr
 City Lodi State CA Zip Code 95240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7282050
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. Hill, Charles, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 Miwok Dr
 City Lodi State CA Zip Code 95240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7282051
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. Hill, Charles, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 Miwok Dr
 City Lodi State CA Zip Code 95240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7289450
 Amount of Each Receipt this Period
 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Hill, Charles, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 Miwok Dr
 City Lodi State CA Zip Code 95240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306479
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Hill, Charles, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 Miwok Dr
 City Lodi State CA Zip Code 95240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306480
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Hill, Charles, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 Miwok Dr
 City Lodi State CA Zip Code 95240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306481
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Hill, Charles, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 Miwok Dr
 City Lodi State CA Zip Code 95240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7315751
 Amount of Each Receipt this Period 30.00
 Memo Item

B. HOOD, PHILIP ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 S HARRISON STREET
 City Little Rock State AR Zip Code 72204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local 105 Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281407
 Amount of Each Receipt this Period 10.00
 Memo Item

C. HOOD, PHILIP ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 S HARRISON STREET
 City Little Rock State AR Zip Code 72204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local 105 Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt **08 / 16 / 2017**
Transaction ID : C7294152
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. HOOD, PHILIP ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 S HARRISON STREET
 City Little Rock State AR Zip Code 72204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local 105 Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt **09 / 14 / 2017**
Transaction ID : C7298545
 Amount of Each Receipt this Period 10.00
 Memo Item

B. HOOD, PHILIP ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 S HARRISON STREET
 City Little Rock State AR Zip Code 72204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local 105 Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt **10 / 23 / 2017**
Transaction ID : C7305889
 Amount of Each Receipt this Period 10.00
 Memo Item

C. HOOD, PHILIP ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 S HARRISON STREET
 City Little Rock State AR Zip Code 72204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local 105 Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt **11 / 17 / 2017**
Transaction ID : C7325835
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 205 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. HOOD, PHILIP ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 S HARRISON STREET
 City Little Rock State AR Zip Code 72204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local 105 Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt **12 / 12 / 2017**
Transaction ID : C7330266
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Howard, Lynnette, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3229 E Foothill Blvd
 City Pasadena State CA Zip Code 91107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #537 Occupation (for Individual) Executive Board Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281444
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Howard, Lynnette, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3229 E Foothill Blvd
 City Pasadena State CA Zip Code 91107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #537 Occupation (for Individual) Executive Board Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **08 / 04 / 2017**
Transaction ID : C7293585
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 206 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Howard, Lynnette, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3229 E Foothill Blvd
 City Pasadena State CA Zip Code 91107
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #537 Occupation (for Individual) Executive Board Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 09 / 08 / 2017
 Transaction ID : C7296747
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Howard, Lynnette, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3229 E Foothill Blvd
 City Pasadena State CA Zip Code 91107
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #537 Occupation (for Individual) Executive Board Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 10 / 04 / 2017
 Transaction ID : C7301081
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Howard, Lynnette, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3229 E Foothill Blvd
 City Pasadena State CA Zip Code 91107
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #537 Occupation (for Individual) Executive Board Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 11 / 06 / 2017
 Transaction ID : C7316307
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Howard, Lynnette, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3229 E Foothill Blvd
 City Pasadena State CA Zip Code 91107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #537 Occupation (for Individual) Executive Board Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **11 / 14 / 2017**
Transaction ID : C7325627
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Howard, Lynnette, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3229 E Foothill Blvd
 City Pasadena State CA Zip Code 91107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #537 Occupation (for Individual) Executive Board Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **12 / 28 / 2017**
Transaction ID : C7335370
 Amount of Each Receipt this Period 25.00
 Memo Item

C. HOWARD, MARCUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 RAMSEY DR #A
 City HAMILTON State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7288948
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 208 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Howard, Marcus, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7558 Penwood Pl
 City Columbus State OH Zip Code 43235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282409
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Howard, Marcus, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7558 Penwood Pl
 City Columbus State OH Zip Code 43235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282410
 Amount of Each Receipt this Period 30.00
 Memo Item

C. HOWARD, MARCUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 RAMSEY DR #A
 City HAMILTON State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311455
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 209 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HOWARD, MARCUS, , ,			Date of Receipt
Mailing Address 2 RAMSEY DR #A			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City HAMILTON	State OH	Zip Code 43015	Transaction ID : C7311456
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="120.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HOWARD, MARCUS, , ,			Date of Receipt
Mailing Address 2 RAMSEY DR #A			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City HAMILTON	State OH	Zip Code 43015	Transaction ID : C7311457
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="120.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Huntley, Catrina, , ,			Date of Receipt
Mailing Address 8000 E Jefferson Ave			<input type="text" value="08"/> / <input type="text" value="04"/> / <input type="text" value="2017"/>
City Detroit	State MI	Zip Code 48214	Transaction ID : C7293747
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer (for Individual) International Union UAW		Occupation (for Individual) staff	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="110.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 210 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Huntley, Catrina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8000 E Jefferson Ave
 City Detroit State MI Zip Code 48214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International Union UAW Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 09 / 08 / 2017
Transaction ID : C7296899
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Huntley, Catrina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8000 E Jefferson Ave
 City Detroit State MI Zip Code 48214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International Union UAW Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 10 / 04 / 2017
Transaction ID : C7305181
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Huntley, Catrina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8000 E Jefferson Ave
 City Detroit State MI Zip Code 48214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International Union UAW Occupation (for Individual) staff
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 12 / 28 / 2017
Transaction ID : C7335498
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 35.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 211 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Iriye, David, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3540 Columbine St

City Seal Beach	State CA	Zip Code 90740
--------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282040

Amount of Each Receipt this Period
25.00

Memo Item

B. Iriye, David, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3540 Columbine St

City Seal Beach	State CA	Zip Code 90740
--------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282044

Amount of Each Receipt this Period
25.00

Memo Item

C. Iriye, David, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3540 Columbine St

City Seal Beach	State CA	Zip Code 90740
--------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282045

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Iriye, David, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3540 Columbine St
 City Seal Beach State CA Zip Code 90740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306475
 Amount of Each Receipt this Period 25.00
 Memo Item

B. JACKSON, TAKYIA, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2802 ATTALA RD 2207
 City KOSCIUSKO State MS Zip Code 39090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7287272
 Amount of Each Receipt this Period 20.00
 Memo Item

C. JACKSON, TAKYIA, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2802 ATTALA RD 2207
 City KOSCIUSKO State MS Zip Code 39090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7287273
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 213 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. JENNINGS, ALLAN, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12237 FM 2728
 City TERRELL State TX Zip Code 75161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7284628
 Amount of Each Receipt this Period 100.00
 Memo Item

B. JENNINGS, ALLAN, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12237 FM 2728
 City TERRELL State TX Zip Code 75161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7284629
 Amount of Each Receipt this Period 100.00
 Memo Item

C. JENNINGS, ALLAN, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1303 W WALNUT HILL #140
 City IRVING State TX Zip Code 75038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7287676
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JENNINGS, ALLAN, W, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 2705 BRITTANY LN			Transaction ID : C7315113		
City GRAPEVINE	State TX	Zip Code 76051	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JENNINGS, ALLAN, W, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 2705 BRITTANY LN			Transaction ID : C7315114		
City GRAPEVINE	State TX	Zip Code 76051	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JENNINGS, ALLAN, W, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 2705 BRITTANY LN			Transaction ID : C7315115		
City GRAPEVINE	State TX	Zip Code 76051	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00			

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 215 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Jensen, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6363 Celia Vista Dr.
 City San Diego State CA Zip Code 92115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) Bus. Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **07 / 26 / 2017**
Transaction ID : C7289777
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Jensen, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6363 Celia Vista Dr.
 City San Diego State CA Zip Code 92115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) Bus. Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **08 / 21 / 2017**
Transaction ID : C7296112
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Jensen, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6363 Celia Vista Dr.
 City San Diego State CA Zip Code 92115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU 30 Occupation (for Individual) Bus. Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **09 / 14 / 2017**
Transaction ID : C7299434
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 216 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Jensen, Angela, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2017
Mailing Address 6363 Celia Vista Dr.			Transaction ID : C7305982
City San Diego	State CA	Zip Code 92115	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) Bus. Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 285.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Jensen, Angela, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2017
Mailing Address 6363 Celia Vista Dr.			Transaction ID : C7325865
City San Diego	State CA	Zip Code 92115	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) Bus. Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 285.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Jensen, Angela, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2017
Mailing Address 6363 Celia Vista Dr.			Transaction ID : C7335031
City San Diego	State CA	Zip Code 92115	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OPEIU 30		Occupation (for Individual) Bus. Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 285.00	

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, JARED, R, ,

Mailing Address 1210 CROSS CREEK DR #6

City BRUNSWICK	State OH	Zip Code 44212
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
10 / 27 / 2017

Transaction ID : **C7314551**

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, JARED, R, ,

Mailing Address 1210 CROSS CREEK DR #6

City BRUNSWICK	State OH	Zip Code 44212
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
10 / 27 / 2017

Transaction ID : **C7314552**

Amount of Each Receipt this Period
150.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, KYLE, T, ,

Mailing Address 575 STEEPLE RUN

City ROSWELL	State GA	Zip Code 30075
-----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt
07 / 31 / 2017

Transaction ID : **C7286867**

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 218 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. JOHNSON, KYLE, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 575 STEEPLE RUN
 City ROSWELL State GA Zip Code 30075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7286868
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. JOHNSON, KYLE, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 575 STEEPLE RUN
 City ROSWELL State GA Zip Code 30075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7286869
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. JOHNSON, KYLE, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 575 STEEPLE RUN
 City ROSWELL State GA Zip Code 30075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7309793
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 219 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. JOHNSON, KYLE, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 575 STEEPLE RUN
 City ROSWELL State GA Zip Code 30075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7309794
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. JOHNSON, KYLE, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 575 STEEPLE RUN
 City ROSWELL State GA Zip Code 30075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7309795
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. JONES, SHEELAGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 W TROPICANA #2008
 City LAS VEGAS State NV Zip Code 89103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7285916
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 220 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. JONES, SHEELAGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 W TROPICANA #2008
 City LAS VEGAS State NV Zip Code 89103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285917
 Amount of Each Receipt this Period 10.00
 Memo Item

B. JONES, SHEELAGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 W TROPICANA #2008
 City LAS VEGAS State NV Zip Code 89103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285918
 Amount of Each Receipt this Period 10.00
 Memo Item

C. JONES, SHEELAGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 W TROPICANA #2008
 City LAS VEGAS State NV Zip Code 89103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309411
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 221 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JONES, SHEELAGH, , ,

Mailing Address 5155 W TROPICANA #2008

City LAS VEGAS	State NV	Zip Code 89103
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309412

Amount of Each Receipt this Period
10.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JONES, SHEELAGH, , ,

Mailing Address 5155 W TROPICANA #2008

City LAS VEGAS	State NV	Zip Code 89103
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309413

Amount of Each Receipt this Period
10.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jones, Theatla, , ,

Mailing Address 2222 Bull St

City Savannah	State GA	Zip Code 31401
------------------	-------------	-------------------

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

Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Representative
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2017

Transaction ID : C7281615

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 222 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Jones, Theatla, , ,			Date of Receipt MM / DD / YYYY 08 / 04 / 2017		
Mailing Address 2222 Bull St			Transaction ID : C7293802		
City Savannah	State GA	Zip Code 31401	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU, Local #4873		Occupation (for Individual) Representative			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Jones, Theatla, , ,			Date of Receipt MM / DD / YYYY 09 / 05 / 2017		
Mailing Address 2222 Bull St			Transaction ID : C7296630		
City Savannah	State GA	Zip Code 31401	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU, Local #4873		Occupation (for Individual) Representative			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Jones, Theatla, , ,			Date of Receipt MM / DD / YYYY 10 / 04 / 2017		
Mailing Address 2222 Bull St			Transaction ID : C7301120		
City Savannah	State GA	Zip Code 31401	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU, Local #4873		Occupation (for Individual) Representative			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1200.00			

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 223 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jones, Theatla, , ,

Mailing Address **2222 Bull St**

City Savannah	State GA	Zip Code 31401
-------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Representative
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
10 / 31 / 2017

Transaction ID : C7316072

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jones, Theatla, , ,

Mailing Address **2222 Bull St**

City Savannah	State GA	Zip Code 31401
-------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Representative
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
12 / 07 / 2017

Transaction ID : C7329549

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JUBREY, STEPHEN, J, ,

Mailing Address **3565 TEAKWOOD LN**

City PLANO	State TX	Zip Code 75075
----------------------	--------------------	--------------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
07 / 31 / 2017

Transaction ID : C7289230

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 224 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. JUBREY, STEPHEN, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3565 TEAKWOOD LN

City PLANO	State TX	Zip Code 75075
---------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7289231

Amount of Each Receipt this Period
100.00

Memo Item

B. JUBREY, STEPHEN, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3565 TEAKWOOD LN

City PLANO	State TX	Zip Code 75075
---------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7289232

Amount of Each Receipt this Period
100.00

Memo Item

C. JUBREY, STEPHEN, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3565 TEAKWOOD LN

City PLANO	State TX	Zip Code 75075
---------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311757

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 225 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. JUBREY, STEPHEN, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3565 TEAKWOOD LN

City PLANO	State TX	Zip Code 75075
---------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311758

Amount of Each Receipt this Period
100.00

Memo Item

B. JUBREY, STEPHEN, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3565 TEAKWOOD LN

City PLANO	State TX	Zip Code 75075
---------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311759

Amount of Each Receipt this Period
100.00

Memo Item

C. Kalban, Sidney, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2222 Bull St
Suite 200

City Savannah	State GA	Zip Code 31401
------------------	-------------	-------------------

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

Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Counsel
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2017

Transaction ID : C7281611

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 226 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Kalban, Sidney, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 Suite 200
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 04 / 2017**
Transaction ID : C7293798
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Kalban, Sidney, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 Suite 200
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 05 / 2017**
Transaction ID : C7296631
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Kalban, Sidney, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 Suite 200
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 04 / 2017**
Transaction ID : C7301121
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 227 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Kalban, Sidney, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 Suite 200
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2017
Transaction ID : C7316073
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Kalban, Sidney, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 Suite 200
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 07 / 2017
Transaction ID : C7329545
 Amount of Each Receipt this Period 50.00
 Memo Item

C. KELIHER, JOHN, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289470
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 228 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. KELIHER, JOHN, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7315791
 Amount of Each Receipt this Period 60.00
 Memo Item

B. Keller, Terry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1137 Wlper St Apt 26
 City Hayward State CA Zip Code 94541-6768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 29 Occupation (for Individual) Business Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281412
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Keller, Terry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1137 Wlper St Apt 26
 City Hayward State CA Zip Code 94541-6768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 29 Occupation (for Individual) Business Rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt **08 / 16 / 2017**
Transaction ID : C7294138
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 229 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Keller, Terry, , ,		Date of Receipt MM / DD / YYYY 09 / 14 / 2017
Mailing Address 1137 Wlper St Apt 26		Transaction ID : C7298550
City Hayward	State CA	Zip Code 94541-6768
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) LOCAL 29	Occupation (for Individual) Business Rep	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Keller, Terry, , ,		Date of Receipt MM / DD / YYYY 10 / 23 / 2017
Mailing Address 1137 Wlper St Apt 26		Transaction ID : C7305963
City Hayward	State CA	Zip Code 94541-6768
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer (for Individual) LOCAL 29	Occupation (for Individual) Business Rep	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Keller, Terry, , ,		Date of Receipt MM / DD / YYYY 11 / 06 / 2017
Mailing Address 1137 Wlper St Apt 26		Transaction ID : C7316325
City Hayward	State CA	Zip Code 94541-6768
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer (for Individual) LOCAL 29	Occupation (for Individual) Business Rep	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 615.00	

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 230 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Keller, Terry, , ,			Date of Receipt MM / DD / YYYY 11 / 14 / 2017		
Mailing Address 1137 Wlper St Apt 26			Transaction ID : C7325530		
City Hayward	State CA	Zip Code 94541-6768	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) LOCAL 29		Occupation (for Individual) Business Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 615.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Keller, Terry, , ,			Date of Receipt MM / DD / YYYY 12 / 07 / 2017		
Mailing Address 1137 Wlper St Apt 26			Transaction ID : C7329509		
City Hayward	State CA	Zip Code 94541-6768	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) LOCAL 29		Occupation (for Individual) Business Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 615.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Keller, Terry, , ,			Date of Receipt MM / DD / YYYY 12 / 12 / 2017		
Mailing Address 1137 Wlper St Apt 26			Transaction ID : C7334643		
City Hayward	State CA	Zip Code 94541-6768	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) LOCAL 29		Occupation (for Individual) Business Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 615.00			

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 231 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Kelly, Cynthia, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Membership/Bookkeeper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 20 / 2017
Transaction ID : C7281612
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Kelly, Cynthia, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Membership/Bookkeeper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 04 / 2017
Transaction ID : C7293799
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Kelly, Cynthia, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Membership/Bookkeeper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 05 / 2017
Transaction ID : C7296632
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 232 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Kelly, Cynthia, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Membership/Bookkeeper
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 10 / 04 / 2017
Transaction ID : C7301122
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Kelly, Cynthia, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Membership/Bookkeeper
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 10 / 31 / 2017
Transaction ID : C7316074
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Kelly, Cynthia, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Membership/Bookkeeper
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 12 / 07 / 2017
Transaction ID : C7329547
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 75.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 233 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. KETNER, JENNIFER, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2239 LINCASA PL
 City MANTECA State CA Zip Code 95337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7286233
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. KETNER, JENNIFER, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2239 LINCASA PL
 City MANTECA State CA Zip Code 95337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7286234
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. KETNER, JENNIFER, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2239 LINCASA PL
 City MANTECA State CA Zip Code 95337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7286238
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 234 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. KETNER, JENNIFER, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2239 LINCASA PL
 City MANTECA State CA Zip Code 95337
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309594
 Amount of Each Receipt this Period 25.00
 Memo Item

B. KETNER, JENNIFER, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2239 LINCASA PL
 City MANTECA State CA Zip Code 95337
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309595
 Amount of Each Receipt this Period 25.00
 Memo Item

C. KETNER, JENNIFER, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2239 LINCASA PL
 City MANTECA State CA Zip Code 95337
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309596
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 235 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KRYCZKA, ADRIAN, M, ,

Mailing Address 5600 ASTOR LN #105

City ROLLING MEADOWS	State IL	Zip Code 60008
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7286941

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KRYCZKA, ADRIAN, M, ,

Mailing Address 5600 ASTOR LN #105

City ROLLING MEADOWS	State IL	Zip Code 60008
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7286942

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KRYCZKA, ADRIAN, M, ,

Mailing Address 5600 ASTOR LN #105

City ROLLING MEADOWS	State IL	Zip Code 60008
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7286943

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 236 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. KRYCZKA, ADRIAN, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 ASTOR LN #105
 City ROLLING MEADOWS State IL Zip Code 60008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 140.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309814
 Amount of Each Receipt this Period 20.00
 Memo Item

B. KRYCZKA, ADRIAN, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 ASTOR LN #105
 City ROLLING MEADOWS State IL Zip Code 60008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 140.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309815
 Amount of Each Receipt this Period 20.00
 Memo Item

C. KRYCZKA, ADRIAN, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 ASTOR LN #105
 City ROLLING MEADOWS State IL Zip Code 60008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 140.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309816
 Amount of Each Receipt this Period 20.00
 Memo Item

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

60.00

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

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

FOR LINE NUMBER: PAGE 237 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. LAFOND, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 664 OAK MEADOW DR
 City LAKE OSWEGO State OR Zip Code 97034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289047
 Amount of Each Receipt this Period 41.67
 Memo Item

B. LAFOND, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 664 OAK MEADOW DR
 City LAKE OSWEGO State OR Zip Code 97034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289048
 Amount of Each Receipt this Period 41.67
 Memo Item

C. LAFOND, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 664 OAK MEADOW DR
 City LAKE OSWEGO State OR Zip Code 97034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289049
 Amount of Each Receipt this Period 41.67
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.01
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 238 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. LAFOND, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 664 OAK MEADOW DR

City LAKE OSWEGO	State OR	Zip Code 97034
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311572

Amount of Each Receipt this Period
41.67

Memo Item

B. LAFOND, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 664 OAK MEADOW DR

City LAKE OSWEGO	State OR	Zip Code 97034
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311573

Amount of Each Receipt this Period
41.67

Memo Item

C. LAFOND, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 664 OAK MEADOW DR

City LAKE OSWEGO	State OR	Zip Code 97034
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311574

Amount of Each Receipt this Period
41.67

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 239 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Lanigan, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) OPEIU INTERNATIONAL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.08

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281466
 Amount of Each Receipt this Period 96.16
 Memo Item

B. Lanigan, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) OPEIU INTERNATIONAL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.08

Date of Receipt **08 / 18 / 2017**
Transaction ID : C7295924
 Amount of Each Receipt this Period 96.16
 Memo Item

C. Lanigan, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) OPEIU INTERNATIONAL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.08

Date of Receipt **09 / 14 / 2017**
Transaction ID : C7298616
 Amount of Each Receipt this Period 144.24
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	336.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 240 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Lanigan, Richard, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2017		
Mailing Address 11 Timber Lane			Transaction ID : C7305942		
City Northport	State NY	Zip Code 11768-2418	Amount of Each Receipt this Period 96.16		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU INTERNATIONAL		Occupation (for Individual) PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.08			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lanigan, Richard, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2017		
Mailing Address 11 Timber Lane			Transaction ID : C7316377		
City Northport	State NY	Zip Code 11768-2418	Amount of Each Receipt this Period 96.16		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU INTERNATIONAL		Occupation (for Individual) PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.08			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Lanigan, Richard, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2017		
Mailing Address 11 Timber Lane			Transaction ID : C7330234		
City Northport	State NY	Zip Code 11768-2418	Amount of Each Receipt this Period 96.16		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU INTERNATIONAL		Occupation (for Individual) PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1250.08			

SUBTOTAL of Receipts This Page (optional).....▶	288.48
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 241 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Lester, Roger, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 26 / 2017
Mailing Address 170 Lechuga Lane			Transaction ID : C7289769
City Spring Valley	State CA	Zip Code 91977	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSC		Occupation (for Individual) Executive Board	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 135.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lester, Roger, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 14 / 2017
Mailing Address 170 Lechuga Lane			Transaction ID : C7299435
City Spring Valley	State CA	Zip Code 91977	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSC		Occupation (for Individual) Executive Board	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 135.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Lester, Roger, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2017
Mailing Address 170 Lechuga Lane			Transaction ID : C7305981
City Spring Valley	State CA	Zip Code 91977	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSC		Occupation (for Individual) Executive Board	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 135.00	

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 242 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Lester, Roger, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 Lechuga Lane
 City Spring Valley State CA Zip Code 91977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSC Occupation (for Individual) Executive Board
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 135.00

Date of Receipt **12 / 20 / 2017**
Transaction ID : C7335033
 Amount of Each Receipt this Period 25.00
 Memo Item

B. LLOYD, SABRINA, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 LONGMEADOW DR
 City BARRINGTON HILLS State IL Zip Code 60010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282633
 Amount of Each Receipt this Period 100.00
 Memo Item

C. LLOYD, SABRINA, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 LONGMEADOW DR
 City BARRINGTON HILLS State IL Zip Code 60010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282634
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 243 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LLOYD, SABRINA, N, ,

Mailing Address 9 LONGMEADOW DR

City BARRINGTON HILLS	State IL	Zip Code 60010
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7282635

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LLOYD, SABRINA, N, ,

Mailing Address 9 LONGMEADOW DR

City BARRINGTON HILLS	State IL	Zip Code 60010
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307031

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LLOYD, SABRINA, N, ,

Mailing Address 9 LONGMEADOW DR

City BARRINGTON HILLS	State IL	Zip Code 60010
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307032

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 244 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. LLOYD, SABRINA, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 LONGMEADOW DR
 City BARRINGTON HILLS State IL Zip Code 60010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7307033
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LUSSIER, CHRIS, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 SINGER DR
 City WEST PALM BEACH State FL Zip Code 33404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7285651
 Amount of Each Receipt this Period 100.00
 Memo Item

C. LUSSIER, CHRIS, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 SINGER DR
 City WEST PALM BEACH State FL Zip Code 33404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7285652
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 245 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUSSIER, CHRIS, A, ,

Mailing Address 1240 SINGER DR

City WEST PALM BEACH	State FL	Zip Code 33404
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7285653

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUSSIER, CHRIS, A, ,

Mailing Address 1240 SINGER DR

City WEST PALM BEACH	State FL	Zip Code 33404
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7309255

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUSSIER, CHRIS, A, ,

Mailing Address 1240 SINGER DR

City WEST PALM BEACH	State FL	Zip Code 33404
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7309256

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 246 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. LUSSIER, CHRIS, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1240 SINGER DR

City WEST PALM BEACH	State FL	Zip Code 33404
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7309257

Amount of Each Receipt this Period
100.00

Memo Item

B. LYONS, DARRAEVIOUS, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 FREDONIA CHURCH RD

City BARNESVILLE	State GA	Zip Code 30204
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7286799

Amount of Each Receipt this Period
25.00

Memo Item

C. LYONS, DARRAEVIOUS, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 FREDONIA CHURCH RD

City BARNESVILLE	State GA	Zip Code 30204
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7286800

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 247 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MACDONALD, BRANDON, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9924 UNIVERSAL BLVD UNIT 224-176
 City ORLANDO State FL Zip Code 32819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288216
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MACDONALD, BRANDON, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 TREVOR CT
 City LAKE MARY State FL Zip Code 32746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7284866
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MACDONALD, BRANDON, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 TREVOR CT
 City LAKE MARY State FL Zip Code 32746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7284867
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 248 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MACDONALD, BRANDON, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9924 UNIVERSAL BLVD UNIT 224-176
 City ORLANDO State FL Zip Code 32819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7310660
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MACDONALD, BRANDON, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9924 UNIVERSAL BLVD UNIT 224-176
 City ORLANDO State FL Zip Code 32819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7310661
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MACDONALD, BRANDON, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9924 UNIVERSAL BLVD UNIT 224-176
 City ORLANDO State FL Zip Code 32819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7310662
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 249 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Mahoney, Mary, , ,			Date of Receipt MM / DD / YYYY 07 / 20 / 2017
Mailing Address 44 Pleasant St			Transaction ID : C7281468
City Stoneham	State MA	Zip Code 02180-3828	Amount of Each Receipt this Period 38.46
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) LOCAL 6		Occupation (for Individual) President/Business Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 499.98	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mahoney, Mary, , ,			Date of Receipt MM / DD / YYYY 08 / 18 / 2017
Mailing Address 44 Pleasant St			Transaction ID : C7295928
City Stoneham	State MA	Zip Code 02180-3828	Amount of Each Receipt this Period 38.46
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) LOCAL 6		Occupation (for Individual) President/Business Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 499.98	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mahoney, Mary, , ,			Date of Receipt MM / DD / YYYY 09 / 14 / 2017
Mailing Address 44 Pleasant St			Transaction ID : C7298601
City Stoneham	State MA	Zip Code 02180-3828	Amount of Each Receipt this Period 57.69
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) LOCAL 6		Occupation (for Individual) President/Business Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 499.98	

SUBTOTAL of Receipts This Page (optional).....▶	134.61
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 250 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Mahoney, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 Pleasant St
 City Stoneham State MA Zip Code 02180-3828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 6 Occupation (for Individual) President/Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 10 / 23 / 2017
Transaction ID : C7305936
 Amount of Each Receipt this Period 38.46
 Memo Item

B. Mahoney, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 Pleasant St
 City Stoneham State MA Zip Code 02180-3828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 6 Occupation (for Individual) President/Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 11 / 09 / 2017
Transaction ID : C7316381
 Amount of Each Receipt this Period 38.46
 Memo Item

C. Mahoney, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 Pleasant St
 City Stoneham State MA Zip Code 02180-3828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 6 Occupation (for Individual) President/Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 12 / 12 / 2017
Transaction ID : C7330238
 Amount of Each Receipt this Period 38.46
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	115.38
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 251 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Maloy, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17303 20th Dr SE
 City Bothell State WA Zip Code 98012-6404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU LOCAL 8 Occupation (for Individual) Business Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.30

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281438
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Maloy, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17303 20th Dr SE
 City Bothell State WA Zip Code 98012-6404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU LOCAL 8 Occupation (for Individual) Business Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.30

Date of Receipt **08 / 16 / 2017**
Transaction ID : C7294116
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Maloy, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17303 20th Dr SE
 City Bothell State WA Zip Code 98012-6404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU LOCAL 8 Occupation (for Individual) Business Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.30

Date of Receipt **09 / 08 / 2017**
Transaction ID : C7296765
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 252 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Maloy, Mary, , ,			Date of Receipt
Mailing Address 17303 20th Dr SE			<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2017"/>
City Bothell	State WA	Zip Code 98012-6404	Transaction ID : C7301100
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer (for Individual) OPEIU LOCAL 8		Occupation (for Individual) Business Representative	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="241.30"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Maloy, Mary, , ,			Date of Receipt
Mailing Address 17303 20th Dr SE			<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2017"/>
City Bothell	State WA	Zip Code 98012-6404	Transaction ID : C7305882
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="69.20"/>
Name of Employer (for Individual) OPEIU LOCAL 8		Occupation (for Individual) Business Representative	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="241.30"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Maloy, Mary, , ,			Date of Receipt
Mailing Address 17303 20th Dr SE			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City Bothell	State WA	Zip Code 98012-6404	Transaction ID : C7316083
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer (for Individual) OPEIU LOCAL 8		Occupation (for Individual) Business Representative	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="241.30"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="89.20"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 253 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Maloy, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17303 20th Dr SE
 City Bothell State WA Zip Code 98012-6404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU LOCAL 8 Occupation (for Individual) Business Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.30

Date of Receipt 11 / 14 / 2017
Transaction ID : C7325496
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Maloy, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17303 20th Dr SE
 City Bothell State WA Zip Code 98012-6404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU LOCAL 8 Occupation (for Individual) Business Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.30

Date of Receipt 12 / 07 / 2017
Transaction ID : C7329523
 Amount of Each Receipt this Period 10.00
 Memo Item

C. MANDELLA, MICHAEL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1926 W BURNSIDE ST #815
 City PORTLAND State OR Zip Code 97209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289052
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 254 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MANDELLA, MICHAEL, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1926 W BURNSIDE ST #815

City PORTLAND	State OR	Zip Code 97209
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7289053

Amount of Each Receipt this Period
100.00

Memo Item

B. MANDELLA, MICHAEL, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1926 W BURNSIDE ST #815

City PORTLAND	State OR	Zip Code 97209
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7289054

Amount of Each Receipt this Period
100.00

Memo Item

C. MANDELLA, MICHAEL, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1926 W BURNSIDE ST #815

City PORTLAND	State OR	Zip Code 97209
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7311578

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 255 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MANDELLA, MICHAEL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1926 W BURNSIDE ST #815
 City PORTLAND State OR Zip Code 97209
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311579
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MANDELLA, MICHAEL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1926 W BURNSIDE ST #815
 City PORTLAND State OR Zip Code 97209
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311580
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MANSFIELD, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1941 N WILLOW GLEN PL
 City STAR State ID Zip Code 83669
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) National Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282536
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 256 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MANSFIELD, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1941 N WILLOW GLEN PL
 City STAR State ID Zip Code 83669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282537
 Amount of Each Receipt this Period 20.00
 Memo Item

B. MANSFIELD, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1941 N WILLOW GLEN PL
 City STAR State ID Zip Code 83669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282538
 Amount of Each Receipt this Period 20.00
 Memo Item

C. MANSFIELD, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1941 N WILLOW GLEN PL
 City STAR State ID Zip Code 83669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306932
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 257 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MANSFIELD, RICHARD, , ,			Date of Receipt		
Mailing Address 1941 N WILLOW GLEN PL			M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
City STAR	State ID	Zip Code 83669	Transaction ID : C7306933		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 20.00		
Name of Employer (for Individual) National Income Life Insurance		Occupation (for Individual) Agent	<input type="checkbox"/> Memo Item		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MANSFIELD, RICHARD, , ,			Date of Receipt		
Mailing Address 1941 N WILLOW GLEN PL			M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
City STAR	State ID	Zip Code 83669	Transaction ID : C7306934		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 20.00		
Name of Employer (for Individual) National Income Life Insurance		Occupation (for Individual) Agent	<input type="checkbox"/> Memo Item		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MARSHAUS, THOMAS, S, ,			Date of Receipt		
Mailing Address 6057 HYDE ST			M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
City MENTOR	State ID OH	Zip Code 44060	Transaction ID : C7288987		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 50.00		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 200.00			

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 258 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MARSHAUS, THOMAS, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6057 HYDE ST
 City MENTOR State OH Zip Code 44060
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311502
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MARSHAUS, THOMAS, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6057 HYDE ST
 City MENTOR State OH Zip Code 44060
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311503
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MARSHAUS, THOMAS, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6057 HYDE ST
 City MENTOR State OH Zip Code 44060
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311504
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 259 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MATYSZCZYK, AGNIESZKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1431 W CRAIN
 City PARK RIDGE State IL Zip Code 60068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288471
 Amount of Each Receipt this Period 28.00
 Memo Item

B. MATYSZCZYK, AGNIESZKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1431 W CRAIN
 City PARK RIDGE State IL Zip Code 60068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7310928
 Amount of Each Receipt this Period 28.00
 Memo Item

C. MATYSZCZYK, AGNIESZKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1431 W CRAIN
 City PARK RIDGE State IL Zip Code 60068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7310929
 Amount of Each Receipt this Period 28.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	84.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 260 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MATYSZCZYK, AGNIESZKA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1431 W CRAIN

City PARK RIDGE	State IL	Zip Code 60068
--------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
112.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7310930

Amount of Each Receipt this Period
28.00

Memo Item

B. McAdams, Tim, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3645 Marketplace Blvd #130-298

City East Point	State GA	Zip Code 30344
--------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7282195

Amount of Each Receipt this Period
100.00

Memo Item

C. McAdams, Tim, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3645 Marketplace Blvd #130-298

City East Point	State GA	Zip Code 30344
--------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7282196

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	228.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 261 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. McAdams, Tim, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 Marketplace Blvd #130-298
 City East Point State GA Zip Code 30344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282197
 Amount of Each Receipt this Period 100.00
 Memo Item

B. McAdams, Tim, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 Marketplace Blvd #130-298
 City East Point State GA Zip Code 30344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7306616
 Amount of Each Receipt this Period 100.00
 Memo Item

C. McAdams, Tim, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 Marketplace Blvd #130-298
 City East Point State GA Zip Code 30344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7306617
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 262 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. McAdams, Tim, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 Marketplace Blvd #130-298
 City East Point State GA Zip Code 30344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7306618
 Amount of Each Receipt this Period 100.00
 Memo Item

B. McCreary, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4537 Cove Dr Apt B
 City Carlsbad State CA Zip Code 92008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282022
 Amount of Each Receipt this Period 50.00
 Memo Item

C. McCreary, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4537 Cove Dr Apt B
 City Carlsbad State CA Zip Code 92008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282023
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 263 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. McCreary, John, , ,

Mailing Address 4537 Cove Dr
 Apt B

City Carlsbad State CA Zip Code 92008

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

Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 07 / 31 / 2017
Transaction ID : C7282024

Amount of Each Receipt this Period
 50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. McCreary, John, , ,

Mailing Address 4537 Cove Dr
 Apt B

City Carlsbad State CA Zip Code 92008

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

Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 10 / 27 / 2017
Transaction ID : C7306457

Amount of Each Receipt this Period
 50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. McCreary, John, , ,

Mailing Address 4537 Cove Dr
 Apt B

City Carlsbad State CA Zip Code 92008

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

Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 10 / 27 / 2017
Transaction ID : C7306458

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 264 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. McCreary, John, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 4537 Cove Dr Apt B			Transaction ID : C7306459		
City Carlsbad	State CA	Zip Code 92008	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MCELROY, MATTHEW, S, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
Mailing Address 5315 SIGGELKOW RD			Transaction ID : C7289360		
City MCFARLAND	State WI	Zip Code 53558	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 100.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MCELROY, MATTHEW, S, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 5315 SIGGELKOW RD			Transaction ID : C7311915		
City MCFARLAND	State WI	Zip Code 53558	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 100.00			

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 265 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MCELROY, MATTHEW, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5315 SIGGELKOW RD
 City MCFARLAND State WI Zip Code 53558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311916
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MCELROY, MATTHEW, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5315 SIGGELKOW RD
 City MCFARLAND State WI Zip Code 53558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311917
 Amount of Each Receipt this Period 25.00
 Memo Item

C. McGuire, Kellie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23317 105th Ave SE
 City Kent State WA Zip Code 98031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IBEW Local 77 Occupation (for Individual) Clerical
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 23 / 2017
Transaction ID : C7305751
 Amount of Each Receipt this Period 57.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 107.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 266 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. McGuire, Kellie, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2017		
Mailing Address 23317 105th Ave SE			Transaction ID : C7325498		
City Kent	State WA	Zip Code 98031	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) IBEW Local 77		Occupation (for Individual) Clerical			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MCLEAN, DAVID, E, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
Mailing Address 7740 SOUTHSIDE BLVD			Transaction ID : C7285608		
City JACKSONVILLE	State FL	Zip Code 32256	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life Ins.		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 110.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MCLEAN, DAVID, E, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
Mailing Address 7740 SOUTHSIDE BLVD			Transaction ID : C7285609		
City JACKSONVILLE	State FL	Zip Code 32256	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life Ins.		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 110.00			

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 267 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MCLEAN, DAVID, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7740 SOUTHSIDE BLVD

City JACKSONVILLE	State FL	Zip Code 32256
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7285610

Amount of Each Receipt this Period
10.00

Memo Item

B. MCLEAN, DAVID, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7740 SOUTHSIDE BLVD

City JACKSONVILLE	State FL	Zip Code 32256
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309215

Amount of Each Receipt this Period
10.00

Memo Item

C. MCLEAN, DAVID, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7740 SOUTHSIDE BLVD

City JACKSONVILLE	State FL	Zip Code 32256
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309216

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 268 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MCLEAN, DAVID, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7740 SOUTHSIDE BLVD

City JACKSONVILLE	State FL	Zip Code 32256
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7309220

Amount of Each Receipt this Period
10.00

Memo Item

B. MIJO, KIMBERLEE, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6125 RABBIT TRACK ST

City LAS VEGAS	State NV	Zip Code 89130
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
160.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7285936

Amount of Each Receipt this Period
20.00

Memo Item

C. MIJO, KIMBERLEE, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6125 RABBIT TRACK ST

City LAS VEGAS	State NV	Zip Code 89130
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
160.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7285937

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 269 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MIJO, KIMBERLEE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6125 RABBIT TRACK ST
 City LAS VEGAS State NV Zip Code 89130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 160.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285938
 Amount of Each Receipt this Period 20.00
 Memo Item

B. MILLER, DARREN, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6816 LITTLE BLUE LN
 City HARMONY State FL Zip Code 34773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7284390
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MILLER, DARREN, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6816 LITTLE BLUE LN
 City HARMONY State FL Zip Code 34773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7284391
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 270 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MILLER, DARREN, K, ,			Date of Receipt
Mailing Address 6816 LITTLE BLUE LN			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City HARMONY	State FL	Zip Code 34773	Transaction ID : C7284392
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Insurance Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MILLER, DARREN, K, ,			Date of Receipt
Mailing Address 6816 LITTLE BLUE LN			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City HARMONY	State FL	Zip Code 34773	Transaction ID : C7308399
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Insurance Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MILLER, DARREN, K, ,			Date of Receipt
Mailing Address 6816 LITTLE BLUE LN			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City HARMONY	State FL	Zip Code 34773	Transaction ID : C7308400
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Insurance Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 271 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MILLER, DARREN, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6816 LITTLE BLUE LN
 City HARMONY State FL Zip Code 34773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7308401
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MILTON, JASON, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54714 SUNDALE PL
 City ELKHART State IN Zip Code 46514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7287002
 Amount of Each Receipt this Period 28.00
 Memo Item

C. Mode, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6515 Francis Ave N
 City Seattle State WA Zip Code 98103-5243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 8 Occupation (for Individual) Business Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 813.79

Date of Receipt 07 / 20 / 2017
Transaction ID : C7281440
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	78.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 272 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Mode, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6515 Francis Ave N
 City Seattle State WA Zip Code 98103-5243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 8 Occupation (for Individual) Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 813.79

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2017
Transaction ID : C7281491
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Mode, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6515 Francis Ave N
 City Seattle State WA Zip Code 98103-5243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 8 Occupation (for Individual) Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 813.79

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2017
Transaction ID : C7294118
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. Mode, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6515 Francis Ave N
 City Seattle State WA Zip Code 98103-5243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 8 Occupation (for Individual) Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 813.79

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2017
Transaction ID : C7296767
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	295.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 273 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Mode, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6515 Francis Ave N
 City Seattle State WA Zip Code 98103-5243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 8 Occupation (for Individual) Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 813.79

Date of Receipt 10 / 04 / 2017
Transaction ID : C7301102
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Mode, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6515 Francis Ave N
 City Seattle State WA Zip Code 98103-5243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 8 Occupation (for Individual) Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 813.79

Date of Receipt 10 / 23 / 2017
Transaction ID : C7305879
 Amount of Each Receipt this Period 19.20
 Memo Item

C. Mode, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6515 Francis Ave N
 City Seattle State WA Zip Code 98103-5243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 8 Occupation (for Individual) Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 813.79

Date of Receipt 10 / 31 / 2017
Transaction ID : C7316081
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	59.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 274 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Mode, Suzanne, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2017
Mailing Address 6515 Francis Ave N			Transaction ID : C7325502
City Seattle	State WA	Zip Code 98103-5243	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) LOCAL 8		Occupation (for Individual) Business Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 813.79	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mode, Suzanne, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2017
Mailing Address 6515 Francis Ave N			Transaction ID : C7329521
City Seattle	State WA	Zip Code 98103-5243	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) LOCAL 8		Occupation (for Individual) Business Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 813.79	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Monahan, Jody, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 20 / 2017
Mailing Address 5113 Rees Street			Transaction ID : C7281423
City Omaha	State NE	Zip Code 68106-1754	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OPEIU Local #53		Occupation (for Individual) President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 275 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Monahan, Jody, , ,			Date of Receipt
Mailing Address 5113 Rees Street			<input type="text" value="08"/> / <input type="text" value="04"/> / <input type="text" value="2017"/>
City Omaha	State NE	Zip Code 68106-1754	Transaction ID : C7293589
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer (for Individual) OPEIU Local #53		Occupation (for Individual) President	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="310.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Monahan, Jody, , ,			Date of Receipt
Mailing Address 5113 Rees Street			<input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2017"/>
City Omaha	State NE	Zip Code 68106-1754	Transaction ID : C7296399
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer (for Individual) OPEIU Local #53		Occupation (for Individual) President	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="310.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Monahan, Jody, , ,			Date of Receipt
Mailing Address 5113 Rees Street			<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2017"/>
City Omaha	State NE	Zip Code 68106-1754	Transaction ID : C7301048
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer (for Individual) OPEIU Local #53		Occupation (for Individual) President	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="310.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 276 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Monahan, Jody, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 13 / 2017 Transaction ID : C7322589		
Mailing Address 5113 Rees Street			Amount of Each Receipt this Period 20.00		
City Omaha	State NE	Zip Code 68106-1754	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) OPEIU Local #53		Occupation (for Individual) President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 310.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Monahan, Jody, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2017 Transaction ID : C7329423		
Mailing Address 5113 Rees Street			Amount of Each Receipt this Period 20.00		
City Omaha	State NE	Zip Code 68106-1754	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) OPEIU Local #53		Occupation (for Individual) President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 310.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Monahan, Jody, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2017 Transaction ID : C7335367		
Mailing Address 5113 Rees Street			Amount of Each Receipt this Period 20.00		
City Omaha	State NE	Zip Code 68106-1754	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) OPEIU Local #53		Occupation (for Individual) President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 310.00			

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 277 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Monetti, Pamela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American income life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289481
 Amount of Each Receipt this Period 60.00
 Memo Item

B. Monetti, Pamela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American income life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7315801
 Amount of Each Receipt this Period 60.00
 Memo Item

C. MOODY, TRAVIS, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14417 SPRING DR
 City PROSPECT State KY Zip Code 40059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282974
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 278 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MOODY, TRAVIS, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14417 SPRING DR
 City PROSPECT State KY Zip Code 40059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7282975
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. MOODY, TRAVIS, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14417 SPRING DR
 City PROSPECT State KY Zip Code 40059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7282976
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MOODY, TRAVIS, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14417 SPRING DR
 City PROSPECT State KY Zip Code 40059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7307329
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 279 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MOODY, TRAVIS, P, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017
Mailing Address 14417 SPRING DR			Transaction ID : C7307330
City PROSPECT	State KY	Zip Code 40059	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Income		Occupation (for Individual) Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MOODY, TRAVIS, P, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017
Mailing Address 14417 SPRING DR			Transaction ID : C7307331
City PROSPECT	State KY	Zip Code 40059	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Income		Occupation (for Individual) Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Mooney, Shelby, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2017
Mailing Address 3229 34th Ave W			Transaction ID : C7305880
City Seattle	State WA	Zip Code 98199-2614	Amount of Each Receipt this Period 24.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OPEIU LOCAL 8		Occupation (for Individual) Organizer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 101.00	

SUBTOTAL of Receipts This Page (optional).....▶	224.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 280 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Mooney, Shelby, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3229 34th Ave W
 City Seattle State WA Zip Code 98199-2614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU LOCAL 8 Occupation (for Individual) Organizer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 101.00

Date of Receipt **11 / 14 / 2017**
Transaction ID : C7325504
 Amount of Each Receipt this Period 20.00
 Memo Item

B. MOORE, DAMEON, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6435 JOLIET RD #3WR
 City LA GRANGE State IL Zip Code 60525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7286945
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Moore, Denise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6324 Maxwell
 City Suitland State MD Zip Code 20746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 4873 Occupation (for Individual) member at large
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281610
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 281 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Moore, Denise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6324 Maxwell
 City Suitland State MD Zip Code 20746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 4873 Occupation (for Individual) member at large
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2017
Transaction ID : C7293797
 Amount of Each Receipt this Period
 10.00
 Memo Item

B. Moore, Denise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6324 Maxwell
 City Suitland State MD Zip Code 20746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 4873 Occupation (for Individual) member at large
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2017
Transaction ID : C7296633
 Amount of Each Receipt this Period
 10.00
 Memo Item

C. Moore, Denise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6324 Maxwell
 City Suitland State MD Zip Code 20746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 4873 Occupation (for Individual) member at large
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2017
Transaction ID : C7301123
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 282 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Moore, Denise, , ,			Date of Receipt
Mailing Address 6324 Maxwell			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City Suitland	State MD	Zip Code 20746	Transaction ID : C7316075
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer (for Individual) OPEIU Local 4873		Occupation (for Individual) member at large	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="120.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Moore, Denise, , ,			Date of Receipt
Mailing Address 6324 Maxwell			<input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2017"/>
City Suitland	State MD	Zip Code 20746	Transaction ID : C7329552
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer (for Individual) OPEIU Local 4873		Occupation (for Individual) member at large	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="120.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MORGAN, PATRICIA, , ,			Date of Receipt
Mailing Address PO Box 208			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City Waco	State TX	Zip Code 76703	Transaction ID : C7289465
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="170.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 283 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. MORGAN, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 600.00

Date of Receipt 10 / 27 / 2017
 Transaction ID : C7315779
 Amount of Each Receipt this Period 150.00
 Memo Item

B. NEFF, COREY, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9898 MASTERPIECE DR
 City LAS VEGAS State NV Zip Code 89148
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 900.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7287412
 Amount of Each Receipt this Period 100.00
 Memo Item

C. NEFF, COREY, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9898 MASTERPIECE DR
 City LAS VEGAS State NV Zip Code 89148
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 900.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7287413
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. NEFF, COREY, A, ,			Date of Receipt		
Mailing Address 9898 MASTERPIECE DR			M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
City LAS VEGAS			State NV	Zip Code 89148	
FEC ID number of contributing federal political committee. C			Transaction ID : C7287417		
Name of Employer (for Individual) American Income			Occupation (for Individual) agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Amount of Each Receipt this Period 100.00		
Aggregate Year-to-Date ▼ 900.00			<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. NEFF, COREY, A, ,			Date of Receipt		
Mailing Address 9898 MASTERPIECE DR			M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
City LAS VEGAS			State NV	Zip Code 89148	
FEC ID number of contributing federal political committee. C			Transaction ID : C7310049		
Name of Employer (for Individual) American Income			Occupation (for Individual) agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Amount of Each Receipt this Period 100.00		
Aggregate Year-to-Date ▼ 900.00			<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. NEFF, COREY, A, ,			Date of Receipt		
Mailing Address 9898 MASTERPIECE DR			M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
City LAS VEGAS			State NV	Zip Code 89148	
FEC ID number of contributing federal political committee. C			Transaction ID : C7310050		
Name of Employer (for Individual) American Income			Occupation (for Individual) agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Amount of Each Receipt this Period 100.00		
Aggregate Year-to-Date ▼ 900.00			<input type="checkbox"/> Memo Item		

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 285 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. NEFF, COREY, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **9898 MASTERPIECE DR**

City LAS VEGAS	State NV	Zip Code 89148
--------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7310054

Amount of Each Receipt this Period

100.00

 Memo Item

B. Nikodym, Jan, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **2936 Helix St**

City Spring Valley	State CA	Zip Code 91977
------------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) Kaiser	Occupation (for Individual) Clerical
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2017

Transaction ID : C7289778

Amount of Each Receipt this Period

20.00

 Memo Item

C. Nikodym, Jan, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **2936 Helix St**

City Spring Valley	State CA	Zip Code 91977
------------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) Kaiser	Occupation (for Individual) Clerical
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2017

Transaction ID : C7299436

Amount of Each Receipt this Period

40.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 286 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Nikodym, Jan, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2017		
Mailing Address 2936 Helix St			Transaction ID : C7305985		
City Spring Valley	State CA	Zip Code 91977	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Kaiser		Occupation (for Individual) Clerical			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Nikodym, Jan, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2017		
Mailing Address 2936 Helix St			Transaction ID : C7322516		
City Spring Valley	State CA	Zip Code 91977	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Kaiser		Occupation (for Individual) Clerical			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Nikodym, Jan, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2017		
Mailing Address 2936 Helix St			Transaction ID : C7335035		
City Spring Valley	State CA	Zip Code 91977	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Kaiser		Occupation (for Individual) Clerical			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 220.00			

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 287 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Nolan, Timothy, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6010 W Lake Rd
 City Auburn State NY Zip Code 13021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7315612
 Amount of Each Receipt this Period 60.00
 Memo Item

B. Nolan, Timothy J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6010 W Lake Rd
 City Auburn State NY Zip Code 13021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289525
 Amount of Each Receipt this Period 60.00
 Memo Item

C. Nunez, Diane, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 889 Mayra Ave
 City Chula Vista State CA Zip Code 91911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Permanente Occupation (for Individual) staff
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 159.96

Date of Receipt 07 / 26 / 2017
Transaction ID : C7289770
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 288 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Nunez, Diane, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 889 Mayra Ave
 City Chula Vista State CA Zip Code 91911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Permanente Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 159.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2017
Transaction ID : C7289802
 Amount of Each Receipt this Period 3.46
 Memo Item

B. Nunez, Diane, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 889 Mayra Ave
 City Chula Vista State CA Zip Code 91911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Permanente Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 159.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2017
Transaction ID : C7289808
 Amount of Each Receipt this Period 3.46
 Memo Item

C. Nunez, Diane, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 889 Mayra Ave
 City Chula Vista State CA Zip Code 91911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Permanente Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 159.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2017
Transaction ID : C7296158
 Amount of Each Receipt this Period 6.92
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	13.84
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 289 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Nunez, Diane, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 889 Mayra Ave
 City Chula Vista State CA Zip Code 91911
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Kaiser Permanente Occupation (for Individual) staff
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 159.96

Date of Receipt 09 / 14 / 2017
 Transaction ID : C7299520
 Amount of Each Receipt this Period 3.46
 Memo Item

B. Nunez, Diane, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 889 Mayra Ave
 City Chula Vista State CA Zip Code 91911
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Kaiser Permanente Occupation (for Individual) staff
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 159.96

Date of Receipt 09 / 14 / 2017
 Transaction ID : C7299521
 Amount of Each Receipt this Period 3.46
 Memo Item

C. Nunez, Diane, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 889 Mayra Ave
 City Chula Vista State CA Zip Code 91911
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Kaiser Permanente Occupation (for Individual) staff
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 159.96

Date of Receipt 10 / 23 / 2017
 Transaction ID : C7306262
 Amount of Each Receipt this Period 3.46
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 10.38
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 290 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Nunez, Diane, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 889 Mayra Ave
 City Chula Vista State CA Zip Code 91911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Permanente Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 159.96

Date of Receipt **10 / 23 / 2017**
Transaction ID : C7306263
 Amount of Each Receipt this Period 3.46
 Memo Item

B. Nunez, Diane, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 889 Mayra Ave
 City Chula Vista State CA Zip Code 91911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Permanente Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 159.96

Date of Receipt **11 / 21 / 2017**
Transaction ID : C7326117
 Amount of Each Receipt this Period 3.46
 Memo Item

C. Nunez, Diane, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 889 Mayra Ave
 City Chula Vista State CA Zip Code 91911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Permanente Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 159.96

Date of Receipt **11 / 21 / 2017**
Transaction ID : C7326118
 Amount of Each Receipt this Period 3.46
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	10.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 291 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Nunez, Diane, T., ,			Date of Receipt		
Mailing Address 889 Mayra Ave			M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2017		
City Chula Vista		State CA	Zip Code 91911		
FEC ID number of contributing federal political committee. C			Transaction ID : C7326119		
Name of Employer (for Individual) Kaiser Permanente			Occupation (for Individual) staff		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 159.96			
			Amount of Each Receipt this Period 3.46		
			<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Nunez, Diane, T., ,			Date of Receipt		
Mailing Address 889 Mayra Ave			M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2017		
City Chula Vista		State CA	Zip Code 91911		
FEC ID number of contributing federal political committee. C			Transaction ID : C7334865		
Name of Employer (for Individual) Kaiser Permanente			Occupation (for Individual) staff		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 159.96			
			Amount of Each Receipt this Period 3.46		
			<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Nunez, Diane, T., ,			Date of Receipt		
Mailing Address 889 Mayra Ave			M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2017		
City Chula Vista		State CA	Zip Code 91911		
FEC ID number of contributing federal political committee. C			Transaction ID : C7334866		
Name of Employer (for Individual) Kaiser Permanente			Occupation (for Individual) staff		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 159.96			
			Amount of Each Receipt this Period 3.46		
			<input type="checkbox"/> Memo Item		

SUBTOTAL of Receipts This Page (optional).....▶	10.38
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 292 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. OLDHAM, DORIAN, S, ,			Date of Receipt MM / DD / YYYY 07 / 31 / 2017		
Mailing Address 4551 PENNSYLVANIA AVE #1212			Transaction ID : C7287253		
City KANSAS CITY	State MO	Zip Code 64111	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. OLDHAM, DORIAN, S, ,			Date of Receipt MM / DD / YYYY 07 / 31 / 2017		
Mailing Address 4551 PENNSYLVANIA AVE #1212			Transaction ID : C7287254		
City KANSAS CITY	State MO	Zip Code 64111	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. OLDHAM, DORIAN, S, ,			Date of Receipt MM / DD / YYYY 07 / 31 / 2017		
Mailing Address 4551 PENNSYLVANIA AVE #1212			Transaction ID : C7287255		
City KANSAS CITY	State MO	Zip Code 64111	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 700.00			

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 293 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. OLDHAM, DORIAN, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4551 PENNSYLVANIA AVE #1212
 City KANSAS CITY State MO Zip Code 64111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309973
 Amount of Each Receipt this Period 100.00
 Memo Item

B. OLDHAM, DORIAN, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4551 PENNSYLVANIA AVE #1212
 City KANSAS CITY State MO Zip Code 64111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309974
 Amount of Each Receipt this Period 100.00
 Memo Item

C. OLDHAM, DORIAN, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4551 PENNSYLVANIA AVE #1212
 City KANSAS CITY State MO Zip Code 64111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309975
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 294 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Oldham, Durhon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3600.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7289619
 Amount of Each Receipt this Period 1200.00
 Memo Item

B. Oldham, Durhon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3600.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7315658
 Amount of Each Receipt this Period 1200.00
 Memo Item

C. OLEARY, BRITTANY, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2750 PERSIMMON PL
 City RIVERSIDE State CA Zip Code 92506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7285438
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2425.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 295 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. OLSON, ROBERT, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26561 W HIGHLAND DR
 City CHANNAHON State IL Zip Code 60410
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 4800.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7282579
 Amount of Each Receipt this Period 400.00
 Memo Item

B. OLSON, ROBERT, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26561 W HIGHLAND DR
 City CHANNAHON State IL Zip Code 60410
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 4800.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7282580
 Amount of Each Receipt this Period 400.00
 Memo Item

C. OLSON, ROBERT, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26561 W HIGHLAND DR
 City CHANNAHON State IL Zip Code 60410
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 4800.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7282581
 Amount of Each Receipt this Period 400.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 296 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. OLSON, ROBERT, , , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26561 W HIGHLAND DR

City CHANNAHON	State IL	Zip Code 60410
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7306977

Amount of Each Receipt this Period
400.00

Memo Item

B. OLSON, ROBERT, , , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26561 W HIGHLAND DR

City CHANNAHON	State IL	Zip Code 60410
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7306978

Amount of Each Receipt this Period
400.00

Memo Item

C. OLSON, ROBERT, , , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26561 W HIGHLAND DR

City CHANNAHON	State IL	Zip Code 60410
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7306979

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 297 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Onasch, Laurie, , ,			Date of Receipt
Mailing Address 632 Moraine Ct			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City Colgate	State WI	Zip Code 53017	Transaction ID : C7289457
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="180.00"/>
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="540.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Page, Christine, , ,			Date of Receipt
Mailing Address 14152 Foothill Blvd #14			<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2017"/>
City Sylmar	State CA	Zip Code 91342	Transaction ID : C7325562
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer (for Individual) Local 174		Occupation (for Individual) Business Rep.	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="270.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PANZER, CHAD, T, ,			Date of Receipt
Mailing Address 9 LEE RIDGE CT			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City COLUMBIA	State SC	Zip Code 29229	Transaction ID : C7287622
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 298 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PANZER, CHAD, T, ,			Date of Receipt
Mailing Address 9 LEE RIDGE CT			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City COLUMBIA	State SC	Zip Code 29229	Transaction ID : C7287623
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PANZER, CHAD, T, ,			Date of Receipt
Mailing Address 9 LEE RIDGE CT			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City COLUMBIA	State SC	Zip Code 29229	Transaction ID : C7287624
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PANZER, CHAD, T, ,			Date of Receipt
Mailing Address 9 LEE RIDGE CT			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City COLUMBIA	State SC	Zip Code 29229	Transaction ID : C7310147
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 299 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PANZER, CHAD, T, ,			Date of Receipt
Mailing Address 9 LEE RIDGE CT			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City COLUMBIA	State SC	Zip Code 29229	Transaction ID : C7310148
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PANZER, CHAD, T, ,			Date of Receipt
Mailing Address 9 LEE RIDGE CT			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City COLUMBIA	State SC	Zip Code 29229	Transaction ID : C7310149
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PAULINO, FELIX, R, ,			Date of Receipt
Mailing Address 280 17TH AVE			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City Paterson	State NJ	Zip Code 07504	Transaction ID : C7287325
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="175.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 300 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. PAULINO, FELIX, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 280 17TH AVE

City Paterson	State NJ	Zip Code 07504
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7287326

Amount of Each Receipt this Period
25.00

Memo Item

B. PAULINO, FELIX, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 280 17TH AVE

City Paterson	State NJ	Zip Code 07504
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7287327

Amount of Each Receipt this Period
25.00

Memo Item

C. PAULINO, FELIX, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 280 17TH AVE

City Paterson	State NJ	Zip Code 07504
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7310012

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 301 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. PAULINO, FELIX, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 280 17TH AVE
 City Paterson State NJ Zip Code 07504
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 175.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7310013
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Pedersen, Colleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 Linda Ln
 City Hampton Bays State NY Zip Code 11946-2201
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU Occupation (for Individual) asst. to the president
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 07 / 20 / 2017
Transaction ID : C7281483
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Pedersen, Colleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 Linda Ln
 City Hampton Bays State NY Zip Code 11946-2201
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU Occupation (for Individual) asst. to the president
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 18 / 2017
Transaction ID : C7295931
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 302 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Pedersen, Colleen, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 14 / 2017		
Mailing Address 19 Linda Ln			Transaction ID : C7298605		
City Hampton Bays	State NY	Zip Code 11946-2201	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU		Occupation (for Individual) asst. to the president			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pedersen, Colleen, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2017		
Mailing Address 19 Linda Ln			Transaction ID : C7305940		
City Hampton Bays	State NY	Zip Code 11946-2201	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU		Occupation (for Individual) asst. to the president			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pedersen, Colleen, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2017		
Mailing Address 19 Linda Ln			Transaction ID : C7316382		
City Hampton Bays	State NY	Zip Code 11946-2201	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) OPEIU		Occupation (for Individual) asst. to the president			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 260.00			

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 303 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Pedersen, Colleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 Linda Ln
 City Hampton Bays State NY Zip Code 11946-2201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Occupation (for Individual) asst. to the president
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 12 / 2017**
Transaction ID : C7330241
 Amount of Each Receipt this Period 20.00
 Memo Item

B. PEREZ, FRANCISCO, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 78 RIVER VUE AVE
 City Warwick State RI Zip Code 02889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7289197
 Amount of Each Receipt this Period 100.00
 Memo Item

C. PEREZ, FRANCISCO, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 78 RIVER VUE AVE
 City Warwick State RI Zip Code 02889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7289198
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 304 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. PEREZ, FRANCISCO, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 78 RIVER VUE AVE
 City Warwick State RI Zip Code 02889
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289199
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PEREZ, FRANCISCO, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 78 RIVER VUE AVE
 City Warwick State RI Zip Code 02889
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7314892
 Amount of Each Receipt this Period 100.00
 Memo Item

C. PEREZ, FRANCISCO, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 78 RIVER VUE AVE
 City Warwick State RI Zip Code 02889
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7314893
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 305 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. PEREZ, FRANCISCO, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 78 RIVER VUE AVE
 City Warwick State RI Zip Code 02889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7314894
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Perez, Maria, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4726 35th St., #1 #1
 City San Diego State CA Zip Code 92116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Admin. Assistant Occupation (for Individual) Admin. Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **07 / 26 / 2017**
Transaction ID : C7289779
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Perez, Maria, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4726 35th St., #1 #1
 City San Diego State CA Zip Code 92116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Admin. Assistant Occupation (for Individual) Admin. Assistant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **08 / 21 / 2017**
Transaction ID : C7296062
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 306 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Perez, Maria, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 14 / 2017
Mailing Address 4726 35th St., #1			Transaction ID : C7299438
City San Diego	State CA	Zip Code 92116	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Admin. Assistant		Occupation (for Individual) Admin. Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Perez, Maria, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2017
Mailing Address 4726 35th St., #1			Transaction ID : C7305988
City San Diego	State CA	Zip Code 92116	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Admin. Assistant		Occupation (for Individual) Admin. Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Perez, Maria, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2017
Mailing Address 4726 35th St., #1			Transaction ID : C7325861
City San Diego	State CA	Zip Code 92116	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Admin. Assistant		Occupation (for Individual) Admin. Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 307 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Perez, Maria, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4726 35th St., #1
 City San Diego State CA Zip Code 92116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Admin. Assistant Occupation (for Individual) Admin. Assistant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 260.00

Date of Receipt **12 / 20 / 2017**
Transaction ID : C7335039
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Perkins, Denise, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Office Manager
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281613
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Perkins, Denise, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Office Manager
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt **08 / 04 / 2017**
Transaction ID : C7293800
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 308 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Perkins, Denise, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Office Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 05 / 2017
Transaction ID : C7296634
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Perkins, Denise, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Office Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 04 / 2017
Transaction ID : C7301124
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Perkins, Denise, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Office Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2017
Transaction ID : C7316076
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 309 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Perkins, Denise, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Office Manager
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt **12 / 07 / 2017**
Transaction ID : C7329548
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Phares, Daniel, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Po Box 625
 City Barrackville State WV Zip Code 26559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 240.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282113
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Phares, Daniel, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Po Box 625
 City Barrackville State WV Zip Code 26559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 240.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282114
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 310 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Phares, Daniel, S, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
Mailing Address Po Box 625			Transaction ID : C7282115		
City Barrackville	State WV	Zip Code 26559	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Phares, Daniel, S, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address Po Box 625			Transaction ID : C7306539		
City Barrackville	State WV	Zip Code 26559	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Phares, Daniel, S, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address Po Box 625			Transaction ID : C7306540		
City Barrackville	State WV	Zip Code 26559	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 240.00			

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 311 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Phares, Daniel, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Po Box 625
 City Barrackville State WV Zip Code 26559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7306544
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Phillips, Ronald, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 990 Thomas Avenue
 City Saint Paul State MN Zip Code 55104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 12 Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 165.00

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281450
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Phillips, Ronald, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 990 Thomas Avenue
 City Saint Paul State MN Zip Code 55104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 12 Occupation (for Individual) staff
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 165.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282011
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 312 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Phillips, Ronald, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 990 Thomas Avenue
 City Saint Paul State MN Zip Code 55104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 12 Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 165.00

Date of Receipt
 08 / 29 / 2017
Transaction ID : C7296398
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Phillips, Ronald, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 990 Thomas Avenue
 City Saint Paul State MN Zip Code 55104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 12 Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 165.00

Date of Receipt
 09 / 26 / 2017
Transaction ID : C7300428
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Phillips, Ronald, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 990 Thomas Avenue
 City Saint Paul State MN Zip Code 55104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 12 Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 165.00

Date of Receipt
 10 / 30 / 2017
Transaction ID : C7316004
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 313 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Phillips, Ronald, W, ,		Date of Receipt
Mailing Address 990 Thomas Avenue		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2017"/>
City Saint Paul	State MN	Zip Code 55104
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7326442
Name of Employer (for Individual) OPEIU Local 12		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Occupation (for Individual) staff		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="165.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Phillips, Ronald, W, ,		Date of Receipt
Mailing Address 990 Thomas Avenue		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2017"/>
City Saint Paul	State MN	Zip Code 55104
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7335372
Name of Employer (for Individual) OPEIU Local 12		Amount of Each Receipt this Period <input type="text" value="15.00"/>
Occupation (for Individual) staff		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="165.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pierre, WERBY, , ,		Date of Receipt
Mailing Address PO Box 208		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City Waco	State TX	Zip Code 76703
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7289697
Name of Employer (for Individual) National Income Life		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Occupation (for Individual) Insurance Agent		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="175.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 314 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Pierre, WERBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7315607
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PILEGGISPANO, RONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8225 BAILEY RD
 City DARIEN State IL Zip Code 60561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7283772
 Amount of Each Receipt this Period 20.00
 Memo Item

C. PILEGGISPANO, RONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8225 BAILEY RD
 City DARIEN State IL Zip Code 60561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7283773
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 315 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. PILEGGISPANO, RONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8225 BAILEY RD
 City DARIEN State IL Zip Code 60561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7283774
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. PILEGGISPANO, RONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8225 BAILEY RD
 City DARIEN State IL Zip Code 60561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7307942
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. POTTS, CHAD, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8329 NW 74TH ST
 City OKLAHOMA CITYH State OK Zip Code 73116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7287500
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 316 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. POTTS, CHAD, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8329 NW 74TH ST
 City OKLAHOMA CITYH State OK Zip Code 73116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7287501
 Amount of Each Receipt this Period 100.00
 Memo Item

B. POTTS, CHAD, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8329 NW 74TH ST
 City OKLAHOMA CITYH State OK Zip Code 73116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7287502
 Amount of Each Receipt this Period 100.00
 Memo Item

C. POTTS, CHAD, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8329 NW 74TH ST
 City OKLAHOMA CITYH State OK Zip Code 73116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7310097
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 317 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. POTTS, CHAD, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8329 NW 74TH ST

City OKLAHOMA CITYH	State OK	Zip Code 73116
------------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
805.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7310098

Amount of Each Receipt this Period
100.00

Memo Item

B. POTTS, CHAD, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8329 NW 74TH ST

City OKLAHOMA CITYH	State OK	Zip Code 73116
------------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
805.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7310099

Amount of Each Receipt this Period
100.00

Memo Item

C. PRATA, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 WEBSTER PARK RD

City SOUTHINGTON	State CT	Zip Code 06489
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7288189

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 318 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRATA, PHILIP, , ,

Mailing Address 107 WEBSTER PARK RD

City SOUTHINGTON	State CT	Zip Code 06489
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7288190

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRATA, PHILIP, , ,

Mailing Address 107 WEBSTER PARK RD

City SOUTHINGTON	State CT	Zip Code 06489
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7288191

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRATA, PHILIP, , ,

Mailing Address 107 WEBSTER PARK RD

City Southington	State CT	Zip Code 06489
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7312824

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 319 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PRATA, PHILIP, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017
Mailing Address 107 WEBSTER PARK RD			Transaction ID : C7312825
City Southington	State CT	Zip Code 06489	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PRATA, PHILIP, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017
Mailing Address 107 WEBSTER PARK RD			Transaction ID : C7312826
City Southington	State CT	Zip Code 06489	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PRESCOTT, DESMOND, M, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017
Mailing Address 3934 PASCO DEL MAR DR			Transaction ID : C7285432
City PERRIS	State CA	Zip Code 92571	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) American Income Life Ins.		Occupation (for Individual) Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 110.00		

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 320 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. PRESCOTT, DESMOND, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3934 PASCO DEL MAR DR

City PERRIS	State CA	Zip Code 92571
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7285433

Amount of Each Receipt this Period

10.00

 Memo Item

B. PRESCOTT, DESMOND, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3934 PASCO DEL MAR DR

City PERRIS	State CA	Zip Code 92571
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7285434

Amount of Each Receipt this Period

10.00

 Memo Item

C. PRESCOTT, DESMOND, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3934 PASCO DEL MAR DR

City PERRIS	State CA	Zip Code 92571
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309131

Amount of Each Receipt this Period

10.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 321 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. PRESCOTT, DESMOND, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3934 PASCO DEL MAR DR

City PERRIS	State CA	Zip Code 92571
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309132

Amount of Each Receipt this Period
10.00

Memo Item

B. PRESCOTT, DESMOND, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3934 PASCO DEL MAR DR

City PERRIS	State CA	Zip Code 92571
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309133

Amount of Each Receipt this Period
10.00

Memo Item

C. PRINZ, DENISE, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3519 LOWELL ST

City SAN DIEGO	State CA	Zip Code 92106
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7287985

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 322 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PRINZ, DENISE, M, ,			Date of Receipt
Mailing Address 3519 LOWELL ST			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City SAN DIEGO	State CA	Zip Code 92106	Transaction ID : C7287986
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="125.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PRINZ, DENISE, M, ,			Date of Receipt
Mailing Address 3519 LOWELL ST			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City SAN DIEGO	State CA	Zip Code 92106	Transaction ID : C7287987
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="125.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PRINZ, DENISE, M, ,			Date of Receipt
Mailing Address 3519 LOWELL ST			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City SAN DIEGO	State CA	Zip Code 92106	Transaction ID : C7310387
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="125.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 323 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. PRINZ, DENISE, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3519 LOWELL ST
 City SAN DIEGO State CA Zip Code 92106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7310388
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. PROSHKOV, JULIA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 E 12 MILE RD
 City ROYAL OAK State MI Zip Code 48073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7285814
 Amount of Each Receipt this Period
 10.00
 Memo Item

C. PROSHKOV, JULIA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 E 12 MILE RD
 City ROYAL OAK State MI Zip Code 48073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7285815
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 324 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PROSHKOV, JULIA, A, ,

Mailing Address 305 E 12 MILE RD

City ROYAL OAK	State MI	Zip Code 48073
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7285819

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PROSHKOV, JULIA, A, ,

Mailing Address 305 E 12 MILE RD

City ROYAL OAK	State MI	Zip Code 48073
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7309350

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PROSHKOV, JULIA, A, ,

Mailing Address 305 E 12 MILE RD

City ROYAL OAK	State MI	Zip Code 48073
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7309351

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="30.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 325 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. PROSHKOV, JULIA, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 E 12 MILE RD

City ROYAL OAK	State MI	Zip Code 48073
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309352

Amount of Each Receipt this Period
10.00

Memo Item

B. Quincey, Phedra, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 802 N 40th Ave. SP 82

City Yakima	State WA	Zip Code 98908
----------------	-------------	-------------------

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

Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
108.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

Transaction ID : C7305789

Amount of Each Receipt this Period
84.20

Memo Item

C. QUINTERO, HUMBERTO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 79 SW 12TH ST #3301

City MIAMI	State FL	Zip Code 33130
---------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7286762

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	194.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 326 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. QUINTERO, HUMBERTO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 79 SW 12TH ST #3301

City MIAMI	State FL	Zip Code 33130
---------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7286763

Amount of Each Receipt this Period
100.00

Memo Item

B. QUINTERO, HUMBERTO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 79 SW 12TH ST #3301

City MIAMI	State FL	Zip Code 33130
---------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7286764

Amount of Each Receipt this Period
100.00

Memo Item

C. QUINTERO, HUMBERTO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 79 SW 12TH ST #3301

City MIAMI	State FL	Zip Code 33130
---------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309769

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 327 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. QUINTERO, HUMBERTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79 SW 12TH ST #3301
 City MIAMI State FL Zip Code 33130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309770
 Amount of Each Receipt this Period 100.00
 Memo Item

B. QUINTERO, HUMBERTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79 SW 12TH ST #3301
 City MIAMI State FL Zip Code 33130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309771
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Radakovich, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10002 Aurora Ave. N Ste 36
 City Seattle State WA Zip Code 98133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 112.50

Date of Receipt 10 / 23 / 2017
Transaction ID : C7305827
 Amount of Each Receipt this Period 67.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	267.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 328 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Ramey, Michael, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11601 Calle Angelica
 City El Cajon State CA Zip Code 92019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Executive Board
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 180.00

Date of Receipt **07 / 26 / 2017**
Transaction ID : C7289772
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Ramey, Michael, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11601 Calle Angelica
 City El Cajon State CA Zip Code 92019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Executive Board
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 180.00

Date of Receipt **09 / 14 / 2017**
Transaction ID : C7299439
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Ramey, Michael, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11601 Calle Angelica
 City El Cajon State CA Zip Code 92019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Executive Board
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 180.00

Date of Receipt **10 / 23 / 2017**
Transaction ID : C7305980
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 329 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Ramey, Michael, A., ,

Mailing Address 11601 Calle Angelica

City El Cajon	State CA	Zip Code 92019
------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Executive Board
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
180.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2017

Transaction ID : C7335041

Amount of Each Receipt this Period
30.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. RAMIREZ, DAVID, T, ,

Mailing Address 5922 E KAVILAND AVE

City FRESNO	State CA	Zip Code 93727
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7284809

Amount of Each Receipt this Period
20.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. RAMIREZ, DAVID, T, ,

Mailing Address 5922 E KAVILAND AVE

City FRESNO	State CA	Zip Code 93727
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7284810

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 330 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. RAMIREZ, DAVID, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5922 E KAVILAND AVE

City FRESNO	State CA	Zip Code 93727
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284811

Amount of Each Receipt this Period
20.00

Memo Item

B. RAMIREZ, DAVID, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5922 E KAVILAND AVE

City FRESNO	State CA	Zip Code 93727
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7308726

Amount of Each Receipt this Period
20.00

Memo Item

C. RAMIREZ, DAVID, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5922 E KAVILAND AVE

City FRESNO	State CA	Zip Code 93727
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7308727

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 331 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. RAMIREZ, DAVID, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5922 E KAVILAND AVE
 City FRESNO State CA Zip Code 93727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7308731
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Ramkhelawan, Tennile, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 971 East 34th St., #C2
 City Brooklyn State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281477
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Ramkhelawan, Tennile, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 971 East 34th St., #C2
 City Brooklyn State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Occupation (for Individual) staff
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt **08 / 18 / 2017**
Transaction ID : C7295933
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 40.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 332 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Ramkhelawan, Tennile, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 971 East 34th St., #C2
 City Brooklyn State NY Zip Code 11210
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt 09 / 14 / 2017
Transaction ID : C7298608
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Ramkhelawan, Tennile, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 971 East 34th St., #C2
 City Brooklyn State NY Zip Code 11210
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt 10 / 23 / 2017
Transaction ID : C7305943
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Ramkhelawan, Tennile, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 971 East 34th St., #C2
 City Brooklyn State NY Zip Code 11210
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt 11 / 09 / 2017
Transaction ID : C7316386
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	35.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 333 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Ramkhelawan, Tennile, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 971 East 34th St., #C2
 City Brooklyn State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Occupation (for Individual) staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt **12 / 12 / 2017**
Transaction ID : C7330245
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Rehberg, Scott, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1153 Thistle Ln
 City Lebanon State OH Zip Code 45036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282411
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Rehberg, Scott, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1153 Thistle Ln
 City Lebanon State OH Zip Code 45036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282412
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	20.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 334 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Rehberg, Scott, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1153 Thistle Ln
 City Lebanon State OH Zip Code 45036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7282413
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Rehberg, Scott, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1153 Thistle Ln
 City Lebanon State OH Zip Code 45036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306815
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Rehberg, Scott, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1153 Thistle Ln
 City Lebanon State OH Zip Code 45036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306816
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 15.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 335 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Rehberg, Scott, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1153 Thistle Ln
 City Lebanon State OH Zip Code 45036
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 360.00

Date of Receipt 10 / 27 / 2017
 Transaction ID : C7306817
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Rennich, Ronald, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 6Th Ave
 City Carnegie State PA Zip Code 15106
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 120.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7282395
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Rennich, Ronald, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 6Th Ave
 City Carnegie State PA Zip Code 15106
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 120.00

Date of Receipt 07 / 31 / 2017
 Transaction ID : C7282396
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 25.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 336 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rennich, Ronald, J, ,

Mailing Address 104 6Th Ave

City Carnegie	State PA	Zip Code 15106
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7282397

Amount of Each Receipt this Period
10.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rennich, Ronald, J, ,

Mailing Address 104 6Th Ave

City Carnegie	State PA	Zip Code 15106
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7306800

Amount of Each Receipt this Period
10.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rennich, Ronald, J, ,

Mailing Address 104 6Th Ave

City Carnegie	State PA	Zip Code 15106
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7306801

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 337 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Rennich, Ronald, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 6Th Ave
 City Carnegie State PA Zip Code 15106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7306802
 Amount of Each Receipt this Period 10.00
 Memo Item

B. REYES, ANTONIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2816 PATTEN HILL DR
 City MATTHEWS State NC Zip Code 28105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7288784
 Amount of Each Receipt this Period 100.00
 Memo Item

C. REYES, ANTONIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2816 PATTEN HILL DR
 City MATTHEWS State NC Zip Code 28105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7288785
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 338 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. REYES, ANTONIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2816 PATTEN HILL DR
 City MATTHEWS State NC Zip Code 28105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288786
 Amount of Each Receipt this Period 100.00
 Memo Item

B. REYES, ANTONIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2816 PATTEN HILL DR
 City MATTHEWS State NC Zip Code 28105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311307
 Amount of Each Receipt this Period 100.00
 Memo Item

C. REYES, ANTONIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2816 PATTEN HILL DR
 City MATTHEWS State NC Zip Code 28105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311308
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 339 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. REYES, ANTONIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2816 PATTEN HILL DR

City MATTHEWS	State NC	Zip Code 28105
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7311309

Amount of Each Receipt this Period
100.00

Memo Item

B. RHINES, LANCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1601 S MICHIGAN RD.

City Eaton Rapids	State MI	Zip Code 48827
----------------------	-------------	-------------------

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

Name of Employer (for Individual) International Union-UAW	Occupation (for Individual) staff
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
130.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

Transaction ID : C7301132

Amount of Each Receipt this Period
35.00

Memo Item

C. RHINES, LANCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1601 S MICHIGAN RD.

City Eaton Rapids	State MI	Zip Code 48827
----------------------	-------------	-------------------

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

Name of Employer (for Individual) International Union-UAW	Occupation (for Individual) staff
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
130.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2017

Transaction ID : C7335603

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	165.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 340 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RICHARD, CARLTON, T, ,

Mailing Address **5332 NUTMEG ST**

City SAN DIEGO	State CA	Zip Code 92105
--------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 27 / 2017

Transaction ID : C7312372

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RICHARD, CARLTON, T, ,

Mailing Address **5332 NUTMEG ST**

City SAN DIEGO	State CA	Zip Code 92105
--------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 27 / 2017

Transaction ID : C7312373

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RICHARD, CARLTON, T, ,

Mailing Address **5332 NUTMEG ST**

City SAN DIEGO	State CA	Zip Code 92105
--------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 27 / 2017

Transaction ID : C7312374

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 341 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. RICHARD, CARLTON, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5332 NUTMEG ST
 City SAN DIEGO State CA Zip Code 92105
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7312375
 Amount of Each Receipt this Period 100.00
 Memo Item

B. RICHARDSON, BRIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2816 HIGHLAND PARK DR
 City STONE MOUNTAIN State GA Zip Code 30087
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7313277
 Amount of Each Receipt this Period 28.00
 Memo Item

C. RICHARDSON, BRIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2816 HIGHLAND PARK DR
 City STONE MOUNTAIN State GA Zip Code 30087
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7313278
 Amount of Each Receipt this Period 28.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	156.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 342 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. RICHARDSON, BRIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2816 HIGHLAND PARK DR
 City STONE MOUNTAIN State GA Zip Code 30087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7313279
 Amount of Each Receipt this Period 28.00
 Memo Item

B. RICHARDSON, BRIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2816 HIGHLAND PARK DR
 City STONE MOUNTAIN State GA Zip Code 30087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 112.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7313280
 Amount of Each Receipt this Period 28.00
 Memo Item

C. Richter, Dovey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7154 West Farrand Rd
 City Clio State MI Zip Code 48420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International Union UAW Occupation (for Individual) Alternate Steward
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 04 / 2017
Transaction ID : C7293632
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	106.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 343 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Richter, Dovey, , ,			Date of Receipt		
Mailing Address 7154 West Farrand Rd			M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2017		
City Clio		State MI	Zip Code 48420		
FEC ID number of contributing federal political committee. C			Transaction ID : C7296828		
Name of Employer (for Individual) International Union UAW		Occupation (for Individual) Alternate Steward		Amount of Each Receipt this Period 75.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		<input type="checkbox"/> Memo Item	
		550.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Richter, Dovey, , ,			Date of Receipt		
Mailing Address 7154 West Farrand Rd			M M M / D D D / Y Y Y Y Y Y 10 / 04 / 2017		
City Clio		State MI	Zip Code 48420		
FEC ID number of contributing federal political committee. C			Transaction ID : C7305164		
Name of Employer (for Individual) International Union UAW		Occupation (for Individual) Alternate Steward		Amount of Each Receipt this Period 50.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		<input type="checkbox"/> Memo Item	
		550.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Richter, Dovey, , ,			Date of Receipt		
Mailing Address 7154 West Farrand Rd			M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2017		
City Clio		State MI	Zip Code 48420		
FEC ID number of contributing federal political committee. C			Transaction ID : C7335478		
Name of Employer (for Individual) International Union UAW		Occupation (for Individual) Alternate Steward		Amount of Each Receipt this Period 50.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼		<input type="checkbox"/> Memo Item	
		550.00			

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 344 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. RICKS, KATRINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 208

City Waco	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) National Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7289675

Amount of Each Receipt this Period
60.00

Memo Item

B. RICKS, KATRINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 208

City Waco	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) National Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7315596

Amount of Each Receipt this Period
60.00

Memo Item

C. RILEY, KIMBERLY, C, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3645 MARKETPLACE BLVD STE 130-

City EAST POINT	State GA	Zip Code 30344
--------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
144.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7283579

Amount of Each Receipt this Period
12.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	132.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 345 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. RILEY, KIMBERLY, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 MARKETPLACE BLVD STE 130-
 City EAST POINT State GA Zip Code 30344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 144.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7283580
 Amount of Each Receipt this Period 12.00
 Memo Item

B. RILEY, KIMBERLY, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 MARKETPLACE BLVD STE 130-
 City EAST POINT State GA Zip Code 30344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 144.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7283581
 Amount of Each Receipt this Period 12.00
 Memo Item

C. RILEY, KIMBERLY, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 MARKETPLACE BLVD STE 130-
 City EAST POINT State GA Zip Code 30344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 144.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307815
 Amount of Each Receipt this Period 12.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 36.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 346 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. RILEY, KIMBERLY, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 MARKETPLACE BLVD STE 130-
 City EAST POINT State GA Zip Code 30344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 144.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307816
 Amount of Each Receipt this Period 12.00
 Memo Item

B. RILEY, KIMBERLY, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 MARKETPLACE BLVD STE 130-
 City EAST POINT State GA Zip Code 30344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 144.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307817
 Amount of Each Receipt this Period 12.00
 Memo Item

C. RISUCCI, RAYMOND, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11934 MEADOWPARK CT
 City MARYLAND HEIGHTS State MO Zip Code 63043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7287238
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	124.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 347 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. RISUCCI, RAYMOND, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11934 MEADOWPARK CT

City MARYLAND HEIGHTS	State MO	Zip Code 63043
--------------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7287239

Amount of Each Receipt this Period
100.00

Memo Item

B. RISUCCI, RAYMOND, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11934 MEADOWPARK CT

City MARYLAND HEIGHTS	State MO	Zip Code 63043
--------------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7287240

Amount of Each Receipt this Period
100.00

Memo Item

C. RISUCCI, RAYMOND, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11934 MEADOWPARK CT

City MARYLAND HEIGHTS	State MO	Zip Code 63043
--------------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309969

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 348 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. RISUCCI, RAYMOND, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11934 MEADOWPARK CT
 City MARYLAND HEIGHTS State MO Zip Code 63043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309970
 Amount of Each Receipt this Period 100.00
 Memo Item

B. RISUCCI, RAYMOND, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11934 MEADOWPARK CT
 City MARYLAND HEIGHTS State MO Zip Code 63043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309971
 Amount of Each Receipt this Period 100.00
 Memo Item

C. RODRIGUEZ, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5931 SHARP DR
 City MABELTON State GA Zip Code 30126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7284911
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 349 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. RODRIGUEZ, CHRISTOPHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4777 CLAIRELEE DR

City OWINGS MILLS	State MD	Zip Code 21117
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7288618

Amount of Each Receipt this Period
100.00

Memo Item

B. RODRIGUEZ, CHRISTOPHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4777 CLAIRELEE DR

City OWINGS MILLS	State MD	Zip Code 21117
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7288619

Amount of Each Receipt this Period
100.00

Memo Item

C. RODRIGUEZ, CHRISTOPHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4867 ASHFOOD DUNWOODY

City ATLANTA	State GA	Zip Code 30338
-----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7313333

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 350 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. RODRIGUEZ, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4777 CLAIRELEE DR
 City OWINGS MILLS State MD Zip Code 21117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311083
 Amount of Each Receipt this Period 100.00
 Memo Item

B. RODRIGUEZ, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4777 CLAIRELEE DR
 City OWINGS MILLS State MD Zip Code 21117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311084
 Amount of Each Receipt this Period 100.00
 Memo Item

C. RUBI, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 S BAYBROOK DR #308
 City PALATINE State IL Zip Code 60074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7313472
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 351 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. RUBI, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 S BAYBROOK DR #308
 City PALATINE State IL Zip Code 60074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7313473
 Amount of Each Receipt this Period 40.00
 Memo Item

B. RUBI, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 S BAYBROOK DR #308
 City PALATINE State IL Zip Code 60074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7313474
 Amount of Each Receipt this Period 20.00
 Memo Item

C. RUBI, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 S BAYBROOK DR #308
 City PALATINE State IL Zip Code 60074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7313475
 Amount of Each Receipt this Period 20.00
 Memo Item

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

80.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 352 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. RUBIO, EDWARD, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 67 LISA AVE

City KENNER	State LA	Zip Code 70065
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284449

Amount of Each Receipt this Period
100.00

Memo Item

B. RUBIO, EDWARD, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 67 LISA AVE

City KENNER	State LA	Zip Code 70065
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284450

Amount of Each Receipt this Period
100.00

Memo Item

C. Rubyn, Tamara, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5294 Circle Court

City Concord	State CA	Zip Code 94524
-----------------	-------------	-------------------

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

Name of Employer (for Individual) LOCAL 29	Occupation (for Individual) President/Business Manager
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
790.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2017

Transaction ID : C7281408

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 353 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Rubyn, Tamara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5294 Circle Court
 City Concord State CA Zip Code 94524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 29 Occupation (for Individual) President/Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281493
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Rubyn, Tamara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5294 Circle Court
 City Concord State CA Zip Code 94524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 29 Occupation (for Individual) President/Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt **08 / 16 / 2017**
Transaction ID : C7294134
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Rubyn, Tamara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5294 Circle Court
 City Concord State CA Zip Code 94524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 29 Occupation (for Individual) President/Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt **09 / 14 / 2017**
Transaction ID : C7298546
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	190.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 354 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Rubyn, Tamara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5294 Circle Court
 City Concord State CA Zip Code 94524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 29 Occupation (for Individual) President/Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt **10 / 23 / 2017**
Transaction ID : C7305959
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Rubyn, Tamara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5294 Circle Court
 City Concord State CA Zip Code 94524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 29 Occupation (for Individual) President/Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt **11 / 06 / 2017**
Transaction ID : C7316321
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Rubyn, Tamara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5294 Circle Court
 City Concord State CA Zip Code 94524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 29 Occupation (for Individual) President/Business Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt **11 / 14 / 2017**
Transaction ID : C7325522
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 355 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Rubyn, Tamara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5294 Circle Court
 City Concord State CA Zip Code 94524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 29 Occupation (for Individual) President/Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt 12 / 07 / 2017
Transaction ID : C7329476
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Rubyn, Tamara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5294 Circle Court
 City Concord State CA Zip Code 94524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL 29 Occupation (for Individual) President/Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt 12 / 12 / 2017
Transaction ID : C7334639
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SAKAI, LILY, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6710 S GARTH AVE
 City LOS ANGELES State CA Zip Code 90056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7284250
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 356 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SAKAI, LILY, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6710 S GARTH AVE

City LOS ANGELES	State CA	Zip Code 90056
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284251

Amount of Each Receipt this Period
20.00

Memo Item

B. SAKAI, LILY, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6710 S GARTH AVE

City LOS ANGELES	State CA	Zip Code 90056
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284252

Amount of Each Receipt this Period
20.00

Memo Item

C. SAKAI, LILY, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6710 S GARTH AVE

City LOS ANGELES	State CA	Zip Code 90056
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7308317

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 357 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SAKAI, LILY, T, ,			Date of Receipt												
Mailing Address 6710 S GARTH AVE			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>27</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	10		27		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
10		27		2017											
City LOS ANGELES		State CA	Zip Code 90056												
FEC ID number of contributing federal political committee. C			Transaction ID : C7308318												
Name of Employer (for Individual) American Income			Occupation (for Individual) Insurance Agent												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00													
			Amount of Each Receipt this Period 20.00												
			<input type="checkbox"/> Memo Item												

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SAKAI, LILY, T, ,			Date of Receipt												
Mailing Address 6710 S GARTH AVE			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>27</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	10		27		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
10		27		2017											
City LOS ANGELES		State CA	Zip Code 90056												
FEC ID number of contributing federal political committee. C			Transaction ID : C7308319												
Name of Employer (for Individual) American Income			Occupation (for Individual) Insurance Agent												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00													
			Amount of Each Receipt this Period 20.00												
			<input type="checkbox"/> Memo Item												

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Samra, Paul, S, ,			Date of Receipt												
Mailing Address 4855 Winterbrook Ave			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>31</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	07		31		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
07		31		2017											
City Dublin		State CA	Zip Code 94568												
FEC ID number of contributing federal political committee. C			Transaction ID : C7282425												
Name of Employer (for Individual) American Income Life Ins.			Occupation (for Individual) Insurance Agent												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 240.00													
			Amount of Each Receipt this Period 20.00												
			<input type="checkbox"/> Memo Item												

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 358 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Samra, Paul, S, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4855 Winterbrook Ave

City Dublin	State CA	Zip Code 94568
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282426

Amount of Each Receipt this Period
20.00

Memo Item

B. Samra, Paul, S, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4855 Winterbrook Ave

City Dublin	State CA	Zip Code 94568
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282427

Amount of Each Receipt this Period
20.00

Memo Item

C. Samra, Paul, S, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4855 Winterbrook Ave

City Dublin	State CA	Zip Code 94568
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7306827

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 359 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Samra, Paul, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4855 Winterbrook Ave
 City Dublin State CA Zip Code 94568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306828
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Samra, Paul, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4855 Winterbrook Ave
 City Dublin State CA Zip Code 94568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306829
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Sanchez, Pat, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7677 Oakport st.
 City Oakland State CA Zip Code 94621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 29 Occupation (for Individual) Sec. Treasurer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 07 / 20 / 2017
Transaction ID : C7281410
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 360 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Sanchez, Pat, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7677 Oakport st.

City Oakland	State CA	Zip Code 94621
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Local 29	Occupation (for Individual) Sec. Treasurer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2017

Transaction ID : C7289738

Amount of Each Receipt this Period
25.00

Memo Item

B. Sanchez, Pat, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7677 Oakport st.

City Oakland	State CA	Zip Code 94621
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Local 29	Occupation (for Individual) Sec. Treasurer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2017

Transaction ID : C7298548

Amount of Each Receipt this Period
50.00

Memo Item

C. Sanchez, Pat, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7677 Oakport st.

City Oakland	State CA	Zip Code 94621
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Local 29	Occupation (for Individual) Sec. Treasurer
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

Transaction ID : C7305961

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	115.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 361 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Sanchez, Pat, , ,			Date of Receipt MM / DD / YYYY 11 / 06 / 2017
Mailing Address 7677 Oakport st.			Transaction ID : C7316323
City Oakland	State CA	Zip Code 94621	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Local 29		Occupation (for Individual) Sec. Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 630.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sanchez, Pat, , ,			Date of Receipt MM / DD / YYYY 11 / 14 / 2017
Mailing Address 7677 Oakport st.			Transaction ID : C7325524
City Oakland	State CA	Zip Code 94621	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Local 29		Occupation (for Individual) Sec. Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 630.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Sanchez, Pat, , ,			Date of Receipt MM / DD / YYYY 12 / 07 / 2017
Mailing Address 7677 Oakport st.			Transaction ID : C7329492
City Oakland	State CA	Zip Code 94621	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Local 29		Occupation (for Individual) Sec. Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 630.00	

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 362 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Sanchez, Pat, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7677 Oakport st.
 City Oakland State CA Zip Code 94621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 29 Occupation (for Individual) Sec. Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2017
Transaction ID : C7334641
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Sanchez, Pat, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7677 Oakport st.
 City Oakland State CA Zip Code 94621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Local 29 Occupation (for Individual) Sec. Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2017
Transaction ID : C7335388
 Amount of Each Receipt this Period
 15.00
 Memo Item

C. Sanchez, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703-0208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American income life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7289484
 Amount of Each Receipt this Period
 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 363 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SANCHEZ, STEVE, G, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 92 N CHEESEBRUSH AVE

City TUCSON	State AZ	Zip Code 85748
----------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7315753

Amount of Each Receipt this Period
60.00

Memo Item

B. Sanders, Aaron, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 464 Grand woods Dr

City Lansing	State MI	Zip Code 48917
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Local 512	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2017

Transaction ID : C7281495

Amount of Each Receipt this Period
250.00

Memo Item

C. SAUERS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 208

City Waco	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7289472

Amount of Each Receipt this Period
72.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	382.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 364 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SAUERS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 208

City Waco	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7315792

Amount of Each Receipt this Period
72.00

Memo Item

B. SAWYER, VANESSA, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 143 HANSCOMB SCHOOL RD

City Limington	State ME	Zip Code 04049
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7288628

Amount of Each Receipt this Period
50.00

Memo Item

C. SAWYER, VANESSA, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 143 HANSCOMB SCHOOL RD

City Limington	State ME	Zip Code 04049
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7311091

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	172.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 365 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SAWYER, VANESSA, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 143 HANSCOMB SCHOOL RD
 City Limington State ME Zip Code 04049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311092
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SAWYER, VANESSA, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 143 HANSCOMB SCHOOL RD
 City Limington State ME Zip Code 04049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311093
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Schu, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 SW Prince St
 City Seattle State WA Zip Code 98116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 08 / 18 / 2017
Transaction ID : C7295942
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 366 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Schu, Cyntha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 SW Prince St
 City Seattle State WA Zip Code 98116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2017
Transaction ID : C7298623
 Amount of Each Receipt this Period
 60.00
 Memo Item

B. Schu, Cyntha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 SW Prince St
 City Seattle State WA Zip Code 98116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2017
Transaction ID : C7305957
 Amount of Each Receipt this Period
 40.00
 Memo Item

C. Schu, Cyntha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 SW Prince St
 City Seattle State WA Zip Code 98116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2017
Transaction ID : C7316392
 Amount of Each Receipt this Period
 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 367 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Schu, Cynthia, , ,			Date of Receipt MM / DD / YYYY 12 / 12 / 2017		
Mailing Address 5041 SW Prince St			Transaction ID : C7330251		
City Seattle	State WA	Zip Code 98116	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Information Requested		Occupation (for Individual) Information Requested	Aggregate Year-to-Date ▼ 480.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Serrano, Joe, , ,			Date of Receipt MM / DD / YYYY 07 / 20 / 2017		
Mailing Address 6070 Gateway E Suite 5006			Transaction ID : C7281609		
City El Paso	State TX	Zip Code 79905	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) local 4873		Occupation (for Individual) Bus. Rep.	Aggregate Year-to-Date ▼ 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Serrano, Joe, , ,			Date of Receipt MM / DD / YYYY 08 / 04 / 2017		
Mailing Address 6070 Gateway E Suite 5006			Transaction ID : C7293796		
City El Paso	State TX	Zip Code 79905	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) local 4873		Occupation (for Individual) Bus. Rep.	Aggregate Year-to-Date ▼ 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 368 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Serrano, Joe, , ,		Date of Receipt MM / DD / YYYY 09 / 05 / 2017
Mailing Address 6070 Gateway E Suite 5006		Transaction ID : C7296635
City El Paso	State TX	Zip Code 79905
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) local 4873	Occupation (for Individual) Bus. Rep.	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Serrano, Joe, , ,		Date of Receipt MM / DD / YYYY 10 / 04 / 2017
Mailing Address 6070 Gateway E Suite 5006		Transaction ID : C7301126
City El Paso	State TX	Zip Code 79905
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) local 4873	Occupation (for Individual) Bus. Rep.	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Serrano, Joe, , ,		Date of Receipt MM / DD / YYYY 10 / 31 / 2017
Mailing Address 6070 Gateway E Suite 5006		Transaction ID : C7316078
City El Paso	State TX	Zip Code 79905
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) local 4873	Occupation (for Individual) Bus. Rep.	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 369 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Serrano, Joe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6070 Gateway E
 Suite 5006
 City El Paso State TX Zip Code 79905
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) local 4873 Occupation (for Individual) Bus. Rep.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2017
Transaction ID : C7329551
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SERUR, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 PATRIOT WAY N
 City North Reading State MA Zip Code 01864
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7288587
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. SERUR, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 PATRIOT WAY N
 City North Reading State MA Zip Code 01864
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7288588
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 370 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SERUR, ALBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 PATRIOT WAY N

City North Reading	State MA	Zip Code 01864
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7288589

Amount of Each Receipt this Period
100.00

Memo Item

B. SERUR, ALBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 PATRIOT WAY N

City North Reading	State MA	Zip Code 01864
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7311051

Amount of Each Receipt this Period
100.00

Memo Item

C. SERUR, ALBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 PATRIOT WAY N

City North Reading	State MA	Zip Code 01864
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7311052

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 371 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SERUR, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 PATRIOT WAY N
 City North Reading State MA Zip Code 01864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7311053
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Shaffer, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17609 N 8th Ave
 City Phoenix State AZ Zip Code 85023-2604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Occupation (for Individual) REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.08

Date of Receipt **07 / 20 / 2017**
Transaction ID : C7281470
 Amount of Each Receipt this Period 38.48
 Memo Item

C. Shaffer, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17609 N 8th Ave
 City Phoenix State AZ Zip Code 85023-2604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Occupation (for Individual) REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 327.08

Date of Receipt **08 / 18 / 2017**
Transaction ID : C7295938
 Amount of Each Receipt this Period 38.48
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	176.96
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 372 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Short, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Whittier St
 City East Orange State NJ Zip Code 07018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 32 Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 20 / 2017
Transaction ID : C7281497
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Siciliano, Marlena, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 20 / 2017
Transaction ID : C7281617
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Siciliano, Marlena, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Controller
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 04 / 2017
Transaction ID : C7293804
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 373 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Siciliano, Marlana, M, ,			Date of Receipt
Mailing Address 2222 Bull St			<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2017"/>
City Savannah	State GA	Zip Code 31401	Transaction ID : C7296637
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) OPEIU, Local #4873		Occupation (for Individual) Controller	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Siciliano, Marlana, M, ,			Date of Receipt
Mailing Address 2222 Bull St			<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2017"/>
City Savannah	State GA	Zip Code 31401	Transaction ID : C7301127
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) OPEIU, Local #4873		Occupation (for Individual) Controller	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Siciliano, Marlana, M, ,			Date of Receipt
Mailing Address 2222 Bull St			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City Savannah	State GA	Zip Code 31401	Transaction ID : C7316079
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) OPEIU, Local #4873		Occupation (for Individual) Controller	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 374 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Siciliano, Marlana, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 07 / 2017**
Transaction ID : C7329546
 Amount of Each Receipt this Period 25.00
 Memo Item

B. SIEBERT, JOHN, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 297 APPLE ORCHARD RD
 City INMAN State SC Zip Code 29349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7314903
 Amount of Each Receipt this Period 25.00
 Memo Item

C. SIEBERT, JOHN, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 297 APPLE ORCHARD RD
 City INMAN State SC Zip Code 29349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7314904
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 375 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SIEBERT, JOHN, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 297 APPLE ORCHARD RD

City INMAN	State SC	Zip Code 29349
---------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7314905

Amount of Each Receipt this Period
75.00

Memo Item

B. SIMMONS, CATHERINE, H, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1575 SUNSHINE TREE BLVD

City LONGWOOD	State FL	Zip Code 32779
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
104.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7285619

Amount of Each Receipt this Period
8.00

Memo Item

C. SIMMONS, CATHERINE, H, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1575 SUNSHINE TREE BLVD

City LONGWOOD	State FL	Zip Code 32779
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
104.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7285620

Amount of Each Receipt this Period
8.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	91.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 376 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SIMMONS, CATHERINE, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1575 SUNSHINE TREE BLVD
 City LONGWOOD State FL Zip Code 32779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7285621
 Amount of Each Receipt this Period 8.00
 Memo Item

B. SIMMONS, CATHERINE, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1575 SUNSHINE TREE BLVD
 City LONGWOOD State FL Zip Code 32779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7309229
 Amount of Each Receipt this Period 8.00
 Memo Item

C. SIMMONS, CATHERINE, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1575 SUNSHINE TREE BLVD
 City LONGWOOD State FL Zip Code 32779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7309230
 Amount of Each Receipt this Period 8.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	24.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 377 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SIORDIA, GUSTAVO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4641 ARLINGTON AVE
 City RIVERSIDE State CA Zip Code 92504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7284771
 Amount of Each Receipt this Period 8.00
 Memo Item

B. SIORDIA, GUSTAVO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4641 ARLINGTON AVE
 City RIVERSIDE State CA Zip Code 92504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7284772
 Amount of Each Receipt this Period 8.00
 Memo Item

C. SIORDIA, GUSTAVO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4641 ARLINGTON AVE
 City RIVERSIDE State CA Zip Code 92504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7284773
 Amount of Each Receipt this Period 8.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	24.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 378 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SIORDIA, GUSTAVO, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 4641 ARLINGTON AVE			Transaction ID : C7308694		
City RIVERSIDE	State CA	Zip Code 92504	Amount of Each Receipt this Period 8.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 104.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SIORDIA, GUSTAVO, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 4641 ARLINGTON AVE			Transaction ID : C7308695		
City RIVERSIDE	State CA	Zip Code 92504	Amount of Each Receipt this Period 8.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 104.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SIORDIA, GUSTAVO, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 4641 ARLINGTON AVE			Transaction ID : C7308696		
City RIVERSIDE	State CA	Zip Code 92504	Amount of Each Receipt this Period 8.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 104.00			

SUBTOTAL of Receipts This Page (optional).....	24.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 379 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SIORDIA, GUSTAVO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4641 ARLINGTON AVE
 City RIVERSIDE State CA Zip Code 92504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 104.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7308697
 Amount of Each Receipt this Period 8.00
 Memo Item

B. Smith, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7721 NW 30th Ter
 City Bethany State OK Zip Code 73008-3638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #381 Occupation (for Individual) Sec.-Treas.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 07 / 20 / 2017
Transaction ID : C7281452
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Smith, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7721 NW 30th Ter
 City Bethany State OK Zip Code 73008-3638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #381 Occupation (for Individual) Sec.-Treas.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 08 / 2017
Transaction ID : C7296743
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	58.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 380 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Smith, Linda, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7721 NW 30th Ter

City Bethany	State OK	Zip Code 73008-3638
-----------------	-------------	------------------------

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

Name of Employer (for Individual) OPEIU, Local #381	Occupation (for Individual) Sec.-Treas.
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

Transaction ID : C7301104

Amount of Each Receipt this Period
20.00

Memo Item

B. Smith, Linda, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7721 NW 30th Ter

City Bethany	State OK	Zip Code 73008-3638
-----------------	-------------	------------------------

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

Name of Employer (for Individual) OPEIU, Local #381	Occupation (for Individual) Sec.-Treas.
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

Transaction ID : C7316085

Amount of Each Receipt this Period
20.00

Memo Item

C. Smith, Linda, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7721 NW 30th Ter

City Bethany	State OK	Zip Code 73008-3638
-----------------	-------------	------------------------

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

Name of Employer (for Individual) OPEIU, Local #381	Occupation (for Individual) Sec.-Treas.
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2017

Transaction ID : C7329519

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 381 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SMITH, ROSA, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 E 10TH ST
 City APOPKA State FL Zip Code 32703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7286722
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SMITH, ROSA, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 E 10TH ST
 City APOPKA State FL Zip Code 32703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7286723
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SNOW, BETH, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1346 WILLOWOOD CT
 City BRENTWOOD State CA Zip Code 94513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288019
 Amount of Each Receipt this Period 80.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 382 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SNOW, BETH, E, ,			Date of Receipt
Mailing Address 1346 WILLOWWOOD CT			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City BRENTWOOD	State CA	Zip Code 94513	Transaction ID : C7288022
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="80.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Snow, Beth, E, ,			Date of Receipt
Mailing Address 4313 Whitehoof Way			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City Antioch	State CA	Zip Code 94531	Transaction ID : C7282414
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="80.00"/>
Name of Employer (for Individual) American Income Life Ins.		Occupation (for Individual) Insurance Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="560.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SNOW, BETH, E, ,			Date of Receipt
Mailing Address 1346 WILLOWWOOD CT			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City BRENTWOOD	State CA	Zip Code 94513	Transaction ID : C7310419
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="80.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="240.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 383 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SNOW, BETH, E, ,			Date of Receipt
Mailing Address 1346 WILLOWWOOD CT			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City BRENTWOOD	State CA	Zip Code 94513	Transaction ID : C7310420
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="80.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SNOW, BETH, E, ,			Date of Receipt
Mailing Address 1346 WILLOWWOOD CT			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City BRENTWOOD	State CA	Zip Code 94513	Transaction ID : C7310424
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="80.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SNOW, CURT, D, ,			Date of Receipt
Mailing Address 1920 KENT DR			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City BRENTWOOD	State CA	Zip Code 94513	Transaction ID : C7282925
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="80.00"/>
Name of Employer (for Individual) American Income		Occupation (for Individual) Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="960.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="240.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 384 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SNOW, CURT, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1920 KENT DR

City BRENTWOOD	State CA	Zip Code 94513
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282926

Amount of Each Receipt this Period
80.00

Memo Item

B. SNOW, CURT, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1920 KENT DR

City BRENTWOOD	State CA	Zip Code 94513
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282927

Amount of Each Receipt this Period
80.00

Memo Item

C. SNOW, CURT, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1920 KENT DR

City BRENTWOOD	State CA	Zip Code 94513
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7307284

Amount of Each Receipt this Period
80.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	240.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 385 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SNOW, CURT, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 KENT DR
 City BRENTWOOD State CA Zip Code 94513
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307285
 Amount of Each Receipt this Period 80.00
 Memo Item

B. SNOW, CURT, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 KENT DR
 City BRENTWOOD State CA Zip Code 94513
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307286
 Amount of Each Receipt this Period 80.00
 Memo Item

C. SONNENBERG, SCOTT, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 ISLAND CAY WAY
 City APOLLO BEACH State FL Zip Code 33572
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288323
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	260.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 386 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Spade, Judith, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289473
 Amount of Each Receipt this Period 60.00
 Memo Item

B. Spade, Judith, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7315793
 Amount of Each Receipt this Period 60.00
 Memo Item

C. SPARBY, JOHN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6024 158TH ST W
 City SAINT PAUL State MN Zip Code 55124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7284071
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 387 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SPARBY, JOHN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6024 158TH ST W
 City SAINT PAUL State MN Zip Code 55124
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7284075
 Amount of Each Receipt this Period 40.00
 Memo Item

B. SPARBY, JOHN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6024 158TH ST W
 City SAINT PAUL State MN Zip Code 55124
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7284076
 Amount of Each Receipt this Period 40.00
 Memo Item

C. SPARBY, JOHN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6024 158TH ST W
 City SAINT PAUL State MN Zip Code 55124
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7308172
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 388 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. SPARBY, JOHN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6024 158TH ST W
 City SAINT PAUL State MN Zip Code 55124
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7308173
 Amount of Each Receipt this Period 40.00
 Memo Item

B. SPARBY, JOHN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6024 158TH ST W
 City SAINT PAUL State MN Zip Code 55124
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7308174
 Amount of Each Receipt this Period 40.00
 Memo Item

C. STENGLEIN, PATRICK, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14980 53RD AVE N
 City MINNEAPOLIS State MN Zip Code 55446
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7283833
 Amount of Each Receipt this Period 20.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 389 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. STENGLEIN, PATRICK, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14980 53RD AVE N
 City MINNEAPOLIS State MN Zip Code 55446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7283834
 Amount of Each Receipt this Period 20.00
 Memo Item

B. STENGLEIN, PATRICK, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14980 53RD AVE N
 City MINNEAPOLIS State MN Zip Code 55446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7283835
 Amount of Each Receipt this Period 20.00
 Memo Item

C. STENGLEIN, PATRICK, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14980 53RD AVE N
 City MINNEAPOLIS State MN Zip Code 55446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307981
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 390 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. STENGLEIN, PATRICK, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14980 53RD AVE N
 City MINNEAPOLIS State MN Zip Code 55446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307985
 Amount of Each Receipt this Period 20.00
 Memo Item

B. STENGLEIN, PATRICK, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14980 53RD AVE N
 City MINNEAPOLIS State MN Zip Code 55446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307986
 Amount of Each Receipt this Period 20.00
 Memo Item

C. STEWART, OLIVIA, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 PICCADILLY DR
 City HAMILTON State OH Zip Code 45013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285984
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 391 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. STEWART, OLIVIA, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 PICCADILLY DR

City HAMILTON	State OH	Zip Code 45013
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7285985

Amount of Each Receipt this Period
10.00

Memo Item

B. STEWART, OLIVIA, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 PICCADILLY DR

City HAMILTON	State OH	Zip Code 45013
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7285986

Amount of Each Receipt this Period
10.00

Memo Item

C. STEWART, OLIVIA, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 PICCADILLY DR

City HAMILTON	State OH	Zip Code 45013
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7309445

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 392 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. STEWART, OLIVIA, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 PICCADILLY DR
 City HAMILTON State OH Zip Code 45013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309446
 Amount of Each Receipt this Period 10.00
 Memo Item

B. STEWART, OLIVIA, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 PICCADILLY DR
 City HAMILTON State OH Zip Code 45013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309447
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Sukhu, Jagdish, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289645
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 393 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Sukhu, Jagdish, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) National Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7315643
 Amount of Each Receipt this Period
 30.00
 Memo Item

B. Surace, James, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4992.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7282472
 Amount of Each Receipt this Period
 416.00
 Memo Item

C. Surace, James, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4992.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7282473
 Amount of Each Receipt this Period
 416.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	862.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 394 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Surace, James, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4992.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7282474
 Amount of Each Receipt this Period
 416.00
 Memo Item

B. Surace, James, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4992.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7306867
 Amount of Each Receipt this Period
 416.00
 Memo Item

C. Surace, James, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4992.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7306868
 Amount of Each Receipt this Period
 416.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1248.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 395 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Surace, James, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 4992.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306869
 Amount of Each Receipt this Period 416.00
 Memo Item

B. Swanson, Carmella, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American income life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 270.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7289480
 Amount of Each Receipt this Period 90.00
 Memo Item

C. Swanson, Carmella, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American income life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 270.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7315800
 Amount of Each Receipt this Period 90.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	596.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 396 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Taylor, Sharon, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1412 Hess Ave

City Lansing	State MI	Zip Code 48910-1339
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Local 459	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

Transaction ID : C7301134

Amount of Each Receipt this Period
30.00

Memo Item

B. Taylor, Sharon, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1412 Hess Ave

City Lansing	State MI	Zip Code 48910-1339
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Local 459	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2017

Transaction ID : C7335358

Amount of Each Receipt this Period
30.00

Memo Item

C. TEMPLE, TROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 S ALMA SCHOOL RD 77

City CHANDLER	State AZ	Zip Code 85224
------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
180.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7285368

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 397 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. TEMPLE, TROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 S ALMA SCHOOL RD 77

City CHANDLER	State AZ	Zip Code 85224
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7285369

Amount of Each Receipt this Period

Memo Item

B. TEMPLE, TROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 S ALMA SCHOOL RD 77

City CHANDLER	State AZ	Zip Code 85224
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7285370

Amount of Each Receipt this Period

Memo Item

C. TEMPLE, TROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 S ALMA SCHOOL RD 77

City CHANDLER	State AZ	Zip Code 85224
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Ins.	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7309087

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 398 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Teske, Dustin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13322 Dana Vista St.
 City Poway State CA Zip Code 92064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 115.00

Date of Receipt 07 / 26 / 2017
Transaction ID : C7289930
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Teske, Dustin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13322 Dana Vista St.
 City Poway State CA Zip Code 92064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 115.00

Date of Receipt 07 / 26 / 2017
Transaction ID : C7289931
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Teske, Dustin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13322 Dana Vista St.
 City Poway State CA Zip Code 92064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 115.00

Date of Receipt 08 / 21 / 2017
Transaction ID : C7296060
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	20.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 399 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Teske, Dustin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13322 Dana Vista St.
 City Poway State CA Zip Code 92064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 115.00

Date of Receipt 09 / 14 / 2017
Transaction ID : C7299528
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Teske, Dustin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13322 Dana Vista St.
 City Poway State CA Zip Code 92064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 115.00

Date of Receipt 09 / 14 / 2017
Transaction ID : C7299529
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Teske, Dustin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13322 Dana Vista St.
 City Poway State CA Zip Code 92064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 115.00

Date of Receipt 10 / 23 / 2017
Transaction ID : C7306026
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 400 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Teske, Dustin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13322 Dana Vista St.
 City Poway State CA Zip Code 92064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 115.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2017
Transaction ID : C7306027
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. Teske, Dustin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13322 Dana Vista St.
 City Poway State CA Zip Code 92064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 115.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2017
Transaction ID : C7325941
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. Teske, Dustin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13322 Dana Vista St.
 City Poway State CA Zip Code 92064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaiser Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 115.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2017
Transaction ID : C7325942
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 401 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Thiel, Jeffery, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 995 Sara Ct

City Pataskala	State OH	Zip Code 43062
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1010.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282230

Amount of Each Receipt this Period
100.00

Memo Item

B. Thiel, Jeffery, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 995 Sara Ct

City Pataskala	State OH	Zip Code 43062
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1010.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282231

Amount of Each Receipt this Period
100.00

Memo Item

C. Thiel, Jeffery, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 995 Sara Ct

City Pataskala	State OH	Zip Code 43062
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1010.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282232

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 402 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Thiel, Jeffery, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 Sara Ct
 City Pataskala State OH Zip Code 43062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1010.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306649
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Thiel, Jeffery, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 Sara Ct
 City Pataskala State OH Zip Code 43062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1010.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306650
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Thiel, Jeffery, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 Sara Ct
 City Pataskala State OH Zip Code 43062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1010.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306651
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 403 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. THIEME, KRISTA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 613 HOLT AVE
 City Manchester State NH Zip Code 03109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7288814
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. THIEME, KRISTA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 613 HOLT AVE
 City Manchester State NH Zip Code 03109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7288815
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. THIEME, KRISTA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 613 HOLT AVE
 City Manchester State NH Zip Code 03109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7288816
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 404 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. THIEME, KRISTA, M, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 613 HOLT AVE			Transaction ID : C7311330		
City Manchester	State NH	Zip Code 03109	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. THIEME, KRISTA, M, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 613 HOLT AVE			Transaction ID : C7311331		
City Manchester	State NH	Zip Code 03109	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. THIEME, KRISTOPHER, M, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 35 TREETOP LANE			Transaction ID : C7314327		
City Manchester	State NH	Zip Code 03102	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested	Aggregate Year-to-Date ▼ 100.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 405 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Thome, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14077 22nd Ave. NE
 City Seattle State WA Zip Code 98125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2017
Transaction ID : C7281436
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Thome, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14077 22nd Ave. NE
 City Seattle State WA Zip Code 98125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2017
Transaction ID : C7294130
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Thome, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14077 22nd Ave. NE
 City Seattle State WA Zip Code 98125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2017
Transaction ID : C7296763
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 406 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Thome, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14077 22nd Ave. NE
 City Seattle State WA Zip Code 98125
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 10 / 04 / 2017
Transaction ID : C7301098
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Thome, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14077 22nd Ave. NE
 City Seattle State WA Zip Code 98125
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 11 / 06 / 2017
Transaction ID : C7316319
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Thome, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14077 22nd Ave. NE
 City Seattle State WA Zip Code 98125
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 12 / 07 / 2017
Transaction ID : C7329533
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 407 OF 458 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. TOWNSEND, ROBERT, L, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
Mailing Address 8298 PEARL OASIS CT			Transaction ID : C7285948		
City LAS VEGAS	State NV	Zip Code 89139	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life Ins.		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. TOWNSEND, ROBERT, L, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
Mailing Address 8298 PEARL OASIS CT			Transaction ID : C7285949		
City LAS VEGAS	State NV	Zip Code 89139	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life Ins.		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. TOWNSEND, ROBERT, L, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
Mailing Address 8298 PEARL OASIS CT			Transaction ID : C7285953		
City LAS VEGAS	State NV	Zip Code 89139	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income Life Ins.		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 220.00			

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 408 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. TOWNSEND, ROBERT, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8298 PEARL OASIS CT
 City LAS VEGAS State NV Zip Code 89139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7309423
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. TOWNSEND, ROBERT, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8298 PEARL OASIS CT
 City LAS VEGAS State NV Zip Code 89139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7309424
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. TOWNSEND, ROBERT, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8298 PEARL OASIS CT
 City LAS VEGAS State NV Zip Code 89139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2017
Transaction ID : C7309425
 Amount of Each Receipt this Period
 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 409 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Trudden, Dawn, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 208

City Waco	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7289474

Amount of Each Receipt this Period
60.00

Memo Item

B. Trudden, Dawn, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 208

City Waco	State TX	Zip Code 76703
--------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7315794

Amount of Each Receipt this Period
60.00

Memo Item

C. Ulreich, Robert, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 180 Vista Del Mor

City San Rafael	State CA	Zip Code 94901
--------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income Life	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7282034

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	145.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 410 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Ulreich, Robert, A, ,			Date of Receipt												
Mailing Address 180 Vista Del Mor			<table border="1" style="width: 100%;"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>31</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	07		31		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
07		31		2017											
City San Rafael			State CA	Zip Code 94901											
FEC ID number of contributing federal political committee. C			Transaction ID : C7282035												
Name of Employer (for Individual) American Income Life			Occupation (for Individual) Insurance Agent												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Amount of Each Receipt this Period 25.00												
Aggregate Year-to-Date ▼ 300.00			<input type="checkbox"/> Memo Item												

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ulreich, Robert, A, ,			Date of Receipt												
Mailing Address 180 Vista Del Mor			<table border="1" style="width: 100%;"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>31</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	07		31		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
07		31		2017											
City San Rafael			State CA	Zip Code 94901											
FEC ID number of contributing federal political committee. C			Transaction ID : C7282036												
Name of Employer (for Individual) American Income Life			Occupation (for Individual) Insurance Agent												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Amount of Each Receipt this Period 25.00												
Aggregate Year-to-Date ▼ 300.00			<input type="checkbox"/> Memo Item												

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Ulreich, Robert, A, ,			Date of Receipt												
Mailing Address 180 Vista Del Mor			<table border="1" style="width: 100%;"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>27</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	10		27		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
10		27		2017											
City San Rafael			State CA	Zip Code 94901											
FEC ID number of contributing federal political committee. C			Transaction ID : C7306469												
Name of Employer (for Individual) American Income Life			Occupation (for Individual) Insurance Agent												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Amount of Each Receipt this Period 25.00												
Aggregate Year-to-Date ▼ 300.00			<input type="checkbox"/> Memo Item												

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 411 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Ulrich, Robert, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 Vista Del Mor
 City San Rafael State CA Zip Code 94901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306470
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Ulrich, Robert, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 Vista Del Mor
 City San Rafael State CA Zip Code 94901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7306474
 Amount of Each Receipt this Period 25.00
 Memo Item

C. UMBERTONE, DANIEL, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4701 LAKELAND DR #29-E
 City FLOWOOD State MS Zip Code 39232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7283042
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 412 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UMBERTONE, DANIEL, X, ,

Mailing Address 4701 LAKELAND DR #29-E

City FLOWOOD	State MS	Zip Code 39232
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7283043

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UMBERTONE, DANIEL, X, ,

Mailing Address 4701 LAKELAND DR #29-E

City FLOWOOD	State MS	Zip Code 39232
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7283044

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UMBERTONE, DANIEL, X, ,

Mailing Address 4701 LAKELAND DR #29-E

City FLOWOOD	State MS	Zip Code 39232
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7307387

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 413 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. UMBERTONE, DANIEL, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4701 LAKELAND DR #29-E
 City FLOWOOD State MS Zip Code 39232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307388
 Amount of Each Receipt this Period 100.00
 Memo Item

B. UMBERTONE, DANIEL, X, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4701 LAKELAND DR #29-E
 City FLOWOOD State MS Zip Code 39232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7307389
 Amount of Each Receipt this Period 100.00
 Memo Item

C. VASANJEE, ANASTASIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4669 SE QUAIL TRL
 City STUART State FL Zip Code 34997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285633
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 414 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. VASANJEE, ANASTASIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4669 SE QUAIL TRL
 City STUART State FL Zip Code 34997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285634
 Amount of Each Receipt this Period 25.00
 Memo Item

B. VASANJEE, ANASTASIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4669 SE QUAIL TRL
 City STUART State FL Zip Code 34997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285635
 Amount of Each Receipt this Period 25.00
 Memo Item

C. VASANJEE, ANASTASIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4669 SE QUAIL TRL
 City STUART State FL Zip Code 34997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309237
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 415 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. VASANJEE, ANASTASIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4669 SE QUAIL TRL
 City STUART State FL Zip Code 34997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309238
 Amount of Each Receipt this Period 25.00
 Memo Item

B. VASANJEE, ANASTASIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4669 SE QUAIL TRL
 City STUART State FL Zip Code 34997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309239
 Amount of Each Receipt this Period 25.00
 Memo Item

C. VASU, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 BEACONS LIGHT PL
 City THE WOODLANDS State TX Zip Code 77375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7284187
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 416 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. VASU, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 BEACONS LIGHT PL

City THE WOODLANDS	State TX	Zip Code 77375
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284188

Amount of Each Receipt this Period
500.00

Memo Item

B. VASU, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 BEACONS LIGHT PL

City THE WOODLANDS	State TX	Zip Code 77375
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7284189

Amount of Each Receipt this Period
500.00

Memo Item

C. VASU, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 BEACONS LIGHT PL

City THE WOODLANDS	State TX	Zip Code 77375
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7308270

Amount of Each Receipt this Period
500.00

Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 417 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. VASU, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 BEACONS LIGHT PL

City THE WOODLANDS	State TX	Zip Code 77375
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7308271

Amount of Each Receipt this Period
500.00

Memo Item

B. VASU, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 BEACONS LIGHT PL

City THE WOODLANDS	State TX	Zip Code 77375
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7308272

Amount of Each Receipt this Period
500.00

Memo Item

C. VELEZ, JOHNATHON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 226 BEDFORD RD

City BOLINGBROOK	State IL	Zip Code 60440
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7288481

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1020.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 418 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. VELEZ, JOHNATHON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 226 BEDFORD RD

City BOLINGBROOK	State IL	Zip Code 60440
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7288482

Amount of Each Receipt this Period
20.00

Memo Item

B. VELEZ, JOHNATHON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 226 BEDFORD RD

City BOLINGBROOK	State IL	Zip Code 60440
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7288483

Amount of Each Receipt this Period
20.00

Memo Item

C. VELEZ, JOHNATHON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 226 BEDFORD RD

City BOLINGBROOK	State IL	Zip Code 60440
---------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7310941

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 419 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. VELEZ, JOHNATHON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 226 BEDFORD RD

City BOLINGBROOK	State IL	Zip Code 60440
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7310942

Amount of Each Receipt this Period

Memo Item

B. VENEKAMP, DUSTIN, WX, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2651 N RIDGE CIR

City MESA	State AZ	Zip Code 85203
--------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7287903

Amount of Each Receipt this Period

Memo Item

C. VENEKAMP, DUSTIN, WX, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6707 ALMERIA RD

City SCOTTSDALE	State AZ	Zip Code 85257
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7283929

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="220.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 420 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. VENEKAMP, DUSTIN, WX, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2017		
Mailing Address 6707 ALMERIA RD			Transaction ID : C7283930		
City SCOTTSDALE	State AZ	Zip Code 85257	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. VENEKAMP, DUSTIN, WX, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 2651 N RIDGE CIR			Transaction ID : C7310295		
City MESA	State AZ	Zip Code 85203	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. VENEKAMP, DUSTIN, WX, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 2651 N RIDGE CIR			Transaction ID : C7310296		
City MESA	State AZ	Zip Code 85203	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) American Income		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 400.00			

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 421 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. VENEKAMP, DUSTIN, WX, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2651 N RIDGE CIR
 City MESA State AZ Zip Code 85203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7310297
 Amount of Each Receipt this Period 100.00
 Memo Item

B. VISBAL, ALICIA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5212 KENWOOD AVE #A
 City BALTIMORE State MD Zip Code 21206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288622
 Amount of Each Receipt this Period 25.00
 Memo Item

C. VISBAL, ALICIA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5212 KENWOOD AVE #A
 City BALTIMORE State MD Zip Code 21206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7288623
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 422 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. VISBAL, ALICIA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5212 KENWOOD AVE #A
 City BALTIMORE State MD Zip Code 21206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311085
 Amount of Each Receipt this Period 25.00
 Memo Item

B. VISBAL, ALICIA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5212 KENWOOD AVE #A
 City BALTIMORE State MD Zip Code 21206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311086
 Amount of Each Receipt this Period 25.00
 Memo Item

C. VISBAL, ALICIA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5212 KENWOOD AVE #A
 City BALTIMORE State MD Zip Code 21206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7311087
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 423 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Washington, Denice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 69th Ave
 City Oakland State CA Zip Code 94621
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU Local 29 Occupation (for Individual) Business Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 20 / 2017
Transaction ID : C7281416
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Washington, Denice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 69th Ave
 City Oakland State CA Zip Code 94621
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU Local 29 Occupation (for Individual) Business Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 16 / 2017
Transaction ID : C7294142
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Washington, Denice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 69th Ave
 City Oakland State CA Zip Code 94621
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU Local 29 Occupation (for Individual) Business Representative
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 14 / 2017
Transaction ID : C7298554
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 424 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Washington, Denice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 69th Ave
 City Oakland State CA Zip Code 94621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 29 Occupation (for Individual) Business Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 23 / 2017
Transaction ID : C7305967
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Washington, Denice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 69th Ave
 City Oakland State CA Zip Code 94621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 29 Occupation (for Individual) Business Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 06 / 2017
Transaction ID : C7316329
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Washington, Denice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 69th Ave
 City Oakland State CA Zip Code 94621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 29 Occupation (for Individual) Business Representative
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 14 / 2017
Transaction ID : C7325528
 Amount of Each Receipt this Period 20.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 425 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Washington, Denice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 69th Ave
 City Oakland State CA Zip Code 94621
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) OPEIU Local 29 Occupation (for Individual) Business Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2017
Transaction ID : C7334647
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. WEATHERSPOON, JAMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 652 RIO VISTA CT
 City SUWANEE State GA Zip Code 30024
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7286875
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. WEATHERSPOON, JAMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 652 RIO VISTA CT
 City SUWANEE State GA Zip Code 30024
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : C7286876
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 426 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. WEATHERSPOON, JAMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 652 RIO VISTA CT
 City SUWANEE State GA Zip Code 30024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7286877
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WEATHERSPOON, JAMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 652 RIO VISTA CT
 City SUWANEE State GA Zip Code 30024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309798
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WEATHERSPOON, JAMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 652 RIO VISTA CT
 City SUWANEE State GA Zip Code 30024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7309799
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 427 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WEATHERSPOON, JAMI, , ,			Date of Receipt		
Mailing Address 652 RIO VISTA CT			M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
City SUWANEE		State GA	Zip Code 30024		
FEC ID number of contributing federal political committee. C			Transaction ID : C7309800		
Name of Employer (for Individual) American Income			Occupation (for Individual) Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00			
			Amount of Each Receipt this Period 100.00		
			<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Weston, Julie Ann, , ,			Date of Receipt		
Mailing Address PO BOX 267			M M M / D D D / Y Y Y Y Y Y 07 / 20 / 2017		
City BUTLER		State WI	Zip Code 53007		
FEC ID number of contributing federal political committee. C			Transaction ID : C7281595		
Name of Employer (for Individual) Northwestern Mutual			Occupation (for Individual) Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00			
			Amount of Each Receipt this Period 25.00		
			<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Weston, Julie Ann, , ,			Date of Receipt		
Mailing Address PO BOX 267			M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2017		
City BUTLER		State WI	Zip Code 53007		
FEC ID number of contributing federal political committee. C			Transaction ID : C7300423		
Name of Employer (for Individual) Northwestern Mutual			Occupation (for Individual) Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 230.00			
			Amount of Each Receipt this Period 30.00		
			<input type="checkbox"/> Memo Item		

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 428 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Weston, Julie Ann, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2017
Mailing Address PO BOX 267			Transaction ID : C7315992
City BUTLER	State WI	Zip Code 53007	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Northwestern Mutual		Occupation (for Individual) Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Weston, Julie Ann, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2017
Mailing Address PO BOX 267			Transaction ID : C7328651
City BUTLER	State WI	Zip Code 53007	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Northwestern Mutual		Occupation (for Individual) Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Weston, Julie Ann, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2017
Mailing Address PO BOX 267			Transaction ID : C7335407
City BUTLER	State WI	Zip Code 53007	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Northwestern Mutual		Occupation (for Individual) Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 429 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. White-Brown, Jacqueline, K, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9700 WALNUT ST.

City Bellflower	State CA	Zip Code 90706
--------------------	-------------	-------------------

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

Name of Employer (for Individual) OPEIU LOCAL 537	Occupation (for Individual) Sec.Treas./Bus. Mgr.
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2017

Transaction ID : C7281442

Amount of Each Receipt this Period
50.00

Memo Item

B. White-Brown, Jacqueline, K, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9700 WALNUT ST.

City Bellflower	State CA	Zip Code 90706
--------------------	-------------	-------------------

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

Name of Employer (for Individual) OPEIU LOCAL 537	Occupation (for Individual) Sec.Treas./Bus. Mgr.
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2017

Transaction ID : C7293583

Amount of Each Receipt this Period
40.00

Memo Item

C. White-Brown, Jacqueline, K, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9700 WALNUT ST.

City Bellflower	State CA	Zip Code 90706
--------------------	-------------	-------------------

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

Name of Employer (for Individual) OPEIU LOCAL 537	Occupation (for Individual) Sec.Treas./Bus. Mgr.
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2017

Transaction ID : C7296745

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 430 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. White-Brown, Jacqueline, K, ,			Date of Receipt												
Mailing Address 9700 WALNUT ST.			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>04</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	10		04		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
10		04		2017											
City Bellflower		State CA	Zip Code 90706												
FEC ID number of contributing federal political committee. C			Transaction ID : C7301079												
Name of Employer (for Individual) OPEIU LOCAL 537			Occupation (for Individual) Sec.Treas./Bus. Mgr.												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00													
			Amount of Each Receipt this Period 50.00												
			<input type="checkbox"/> Memo Item												

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. White-Brown, Jacqueline, K, ,			Date of Receipt												
Mailing Address 9700 WALNUT ST.			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>06</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	11		06		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
11		06		2017											
City Bellflower		State CA	Zip Code 90706												
FEC ID number of contributing federal political committee. C			Transaction ID : C7316305												
Name of Employer (for Individual) OPEIU LOCAL 537			Occupation (for Individual) Sec.Treas./Bus. Mgr.												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00													
			Amount of Each Receipt this Period 40.00												
			<input type="checkbox"/> Memo Item												

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. White-Brown, Jacqueline, K, ,			Date of Receipt												
Mailing Address 9700 WALNUT ST.			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>14</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	11		14		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
11		14		2017											
City Bellflower		State CA	Zip Code 90706												
FEC ID number of contributing federal political committee. C			Transaction ID : C7325625												
Name of Employer (for Individual) OPEIU LOCAL 537			Occupation (for Individual) Sec.Treas./Bus. Mgr.												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 600.00													
			Amount of Each Receipt this Period 60.00												
			<input type="checkbox"/> Memo Item												

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 431 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. White-Brown, Jacqueline, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9700 WALNUT ST.
 City Bellflower State CA Zip Code 90706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU LOCAL 537 Occupation (for Individual) Sec.Treas./Bus. Mgr.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **12 / 28 / 2017**
Transaction ID : C7335368
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Williams, Tom, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282475
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Williams, Tom, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282476
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 432 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Williams, Tom, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7282477
 Amount of Each Receipt this Period 200.00
 Memo Item

B. WILLIAMS, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 S CANNERY ROW CIR
 City DELRAY BEACH State FL Zip Code 33444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7312852
 Amount of Each Receipt this Period 200.00
 Memo Item

C. WILLIAMS, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 S CANNERY ROW CIR
 City DELRAY BEACH State FL Zip Code 33444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 27 / 2017**
Transaction ID : C7312855
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 433 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Williams, Tom, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 208
 City Waco State TX Zip Code 76703
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2000.00

Date of Receipt 10 / 27 / 2017
 Transaction ID : C7306870
 Amount of Each Receipt this Period 200.00
 Memo Item

B. WILLIAMS, TORRANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 929 ALEXANDER ST SE
 City GRAND APIDS State MI Zip Code 49507
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 10 / 27 / 2017
 Transaction ID : C7314119
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WILLIAMS, TORRANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 929 ALEXANDER ST SE
 City GRAND APIDS State MI Zip Code 49507
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 10 / 27 / 2017
 Transaction ID : C7314120
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 434 OF 458
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. WILLIAMS, TORRANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 929 ALEXANDER ST SE
 City GRAND APIDS State MI Zip Code 49507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7314121
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WILLIAMS, TORRANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 929 ALEXANDER ST SE
 City GRAND APIDS State MI Zip Code 49507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2017
Transaction ID : C7314122
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Williams, Trina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 20 / 2017
Transaction ID : C7281618
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 435 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Williams, Trina, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2222 Bull St

City Savannah	State GA	Zip Code 31401
------------------	-------------	-------------------

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

Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Information Requested
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2017

Transaction ID : C7293805

Amount of Each Receipt this Period
25.00

Memo Item

B. Williams, Trina, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2222 Bull St

City Savannah	State GA	Zip Code 31401
------------------	-------------	-------------------

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

Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Information Requested
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2017

Transaction ID : C7296638

Amount of Each Receipt this Period
25.00

Memo Item

C. Williams, Trina, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2222 Bull St

City Savannah	State GA	Zip Code 31401
------------------	-------------	-------------------

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

Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Information Requested
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2017

Transaction ID : C7301128

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 436 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Williams, Trina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 31 / 2017**
Transaction ID : C7316080
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Williams, Trina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 Bull St
 City Savannah State GA Zip Code 31401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU, Local #4873 Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 07 / 2017**
Transaction ID : C7329550
 Amount of Each Receipt this Period 25.00
 Memo Item

C. WILSON, AMERICA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 422 SHADOW GLEN DR
 City NASHVILLE State TN Zip Code 37211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : C7287649
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 437 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. WILSON, AMERICA, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 422 SHADOW GLEN DR

City NASHVILLE	State TN	Zip Code 37211
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7287650

Amount of Each Receipt this Period
20.00

Memo Item

B. WILSON, AMERICA, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 422 SHADOW GLEN DR

City NASHVILLE	State TN	Zip Code 37211
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Information Requested
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7287651

Amount of Each Receipt this Period
20.00

Memo Item

C. YOUNG, JOHN, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3477 S 206TH E AVE

City BROKEN ARROW	State OK	Zip Code 74014
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : C7287472

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 438 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. YOUNG, JOHN, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3477 S 206TH E AVE

City BROKEN ARROW	State OK	Zip Code 74014
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7287473

Amount of Each Receipt this Period
100.00

Memo Item

B. YOUNG, JOHN, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3477 S 206TH E AVE

City BROKEN ARROW	State OK	Zip Code 74014
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7287474

Amount of Each Receipt this Period
100.00

Memo Item

C. YOUNG, JOHN, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3477 S 206TH E AVE

City BROKEN ARROW	State OK	Zip Code 74014
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : C7310079

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 439 OF 458
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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A. YOUNG, JOHN, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3477 S 206TH E AVE

City BROKEN ARROW	State OK	Zip Code 74014
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7310080

Amount of Each Receipt this Period
100.00

Memo Item

B. YOUNG, JOHN, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3477 S 206TH E AVE

City BROKEN ARROW	State OK	Zip Code 74014
----------------------	-------------	-------------------

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

Name of Employer (for Individual) American Income	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : C7310081

Amount of Each Receipt this Period
100.00

Memo Item

C. Zimmerman, Wilma, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 22699

City Savannah	State GA	Zip Code 31403
------------------	-------------	-------------------

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

Name of Employer (for Individual) OPEIU Local 4873	Occupation (for Individual) Rep (KY)
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2017

Transaction ID : C7281616

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 440 OF 458
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Zimmerman, Wilma, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 22699
 City Savannah State GA Zip Code 31403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 4873 Occupation (for Individual) Rep (KY)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 04 / 2017**
Transaction ID : C7293803
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Zimmerman, Wilma, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 22699
 City Savannah State GA Zip Code 31403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 4873 Occupation (for Individual) Rep (KY)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 05 / 2017**
Transaction ID : C7296636
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Zimmerman, Wilma, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 22699
 City Savannah State GA Zip Code 31403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 4873 Occupation (for Individual) Rep (KY)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 04 / 2017**
Transaction ID : C7301125
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 441 OF 458
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Zimmerman, Wilma, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 22699
 City Savannah State GA Zip Code 31403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 4873 Occupation (for Individual) Rep (KY)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2017
Transaction ID : C7316077
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Zimmerman, Wilma, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 22699
 City Savannah State GA Zip Code 31403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPEIU Local 4873 Occupation (for Individual) Rep (KY)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 07 / 2017
Transaction ID : C7329544
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ZOPHIN, DAVID, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 208
 City WACO State TX Zip Code 76703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Income Occupation (for Individual) agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 07 / 31 / 2017
Transaction ID : C7285326
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	86253.31

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 442 OF 458
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
442.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7296403

Amount of Each Receipt this Period
7.84

Memo Item

B. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
442.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7296404

Amount of Each Receipt this Period
1.73

Memo Item

C. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
442.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : C7296405

Amount of Each Receipt this Period
27.59

Memo Item

SUBTOTAL of Receipts This Page (optional).....	37.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 443 OF 458
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7339085

Amount of Each Receipt this Period

Memo Item

B. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7339290

Amount of Each Receipt this Period

Memo Item

C. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7339295

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="40.11"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 444 OF 458
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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A. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
442.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2017

Transaction ID : C7339098

Amount of Each Receipt this Period
7.66

Memo Item

B. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
442.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2017

Transaction ID : C7339291

Amount of Each Receipt this Period
29.62

Memo Item

C. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
442.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2017

Transaction ID : C7339296

Amount of Each Receipt this Period
1.65

Memo Item

SUBTOTAL of Receipts This Page (optional).....	38.93
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 445 OF 458
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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A. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
442.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2017

Transaction ID : C7339125

Amount of Each Receipt this Period

7.99

 Memo Item

B. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
442.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2017

Transaction ID : C7339292

Amount of Each Receipt this Period

30.87

 Memo Item

C. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
442.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2017

Transaction ID : C7339297

Amount of Each Receipt this Period

1.24

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	40.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 446 OF 458
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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A. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
442.54

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		30		2017

Transaction ID : C7339154

Amount of Each Receipt this Period

7.82

 Memo Item

B. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
442.54

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		30		2017

Transaction ID : C7339293

Amount of Each Receipt this Period

28.98

 Memo Item

C. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
442.54

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		30		2017

Transaction ID : C7339298

Amount of Each Receipt this Period

4.74

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	41.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 447 OF 458
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7339288

Amount of Each Receipt this Period

Memo Item

B. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7339294

Amount of Each Receipt this Period

Memo Item

C. CITIBANK, F.S.B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 Pennsylvania Avenue, N.W.

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7339299

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="42.96"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="240.80"/>

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. Chris Murphy

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 127

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement Senate - CT

Candidate Name **MURPHY, CHRISTOPHER SCOTT M, , ,**

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: CT District: 05

Date of Disbursement: 09 / 20 / 2017

FEC Identification Number: C00411660
Transaction ID : D373309

Amount of Each Disbursement this Period: 2500.00

Memo Item

B. DONNELLY FOR INDIANA

Full Name (Last, First, Middle Initial)

Mailing Address 1050 17th Street, NW STE 590

City Washington State DC Zip Code 20036

Purpose of Disbursement Senate - IN

Candidate Name **DONNELLY, JOSEPH, , ,**

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: IN District:

Date of Disbursement: 09 / 20 / 2017

FEC Identification Number: C00393652
Transaction ID : D373306

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. Friends of Josh Newman

Full Name (Last, First, Middle Initial)

Mailing Address 407 West Imperial Highway, Suite H

City Brea State CA Zip Code 92831

Purpose of Disbursement Senate - CA

Candidate Name **Newman, Josh, , ,**

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2017

FEC Identification Number: C
Transaction ID : D373432

Amount of Each Disbursement this Period: 1000.00

Memo Item

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

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

6000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Friends of Josh Newman

Mailing Address 407 West Imperial Highway, Suite H

City Brea State CA Zip Code 92831

Purpose of Disbursement Senate - CA

Category/
Type

Candidate Name Newman, Josh, , ,

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D373434
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Mazie Hirono

Mailing Address PO BOX 677

City HONOLULU State HI Zip Code 96809

Purpose of Disbursement Senate - HI Distric 2, Primary

Category/
Type

Candidate Name HIRONO, MAZIE K, , ,

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify)

State: HI District: 00

Date of Disbursement

/ /

FEC Identification Number

C00420760
Transaction ID : D373575
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Jerry Mc Nerney

Mailing Address P.O. BOX 690371

City STOCKTON State CA Zip Code 95269

Purpose of Disbursement Congress, CA

Category/
Type

Candidate Name MCNERNEY, JERRY, , ,

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: CA District: 09

Date of Disbursement

/ /

FEC Identification Number

C00398644
Transaction ID : D373303
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. MARIA ELENA DURAZO - DEMOCRAT FOR STATE SENATE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2017			

Mailing Address 777 S Figueroa St
Ste 4050

City Los Angeles State CA Zip Code 90017-5864

Purpose of Disbursement
Senate - CA

011
Category/
Type

FEC Identification Number

C

Transaction ID : D373430

Amount of Each Disbursement this Period

2000.00

Memo Item

Candidate Name

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. MARTIN HEINRICH FOR SENATE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			20			2017			

Mailing Address P.O. BOX 25763

City ALBUQUERQUE State NM Zip Code 87125

Purpose of Disbursement
Senate - NM

011
Category/
Type

FEC Identification Number

C C00434563

Transaction ID : D373305

Amount of Each Disbursement this Period

2500.00

Memo Item

Candidate Name

HEINRICH, MARTIN TREVOR, , ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: NM District: 00

Full Name (Last, First, Middle Initial)

C. SCHNEIDER FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			06			2017			

Mailing Address PO BOX 1318

City DEERFIELD State IL Zip Code 60015

Purpose of Disbursement
Congress, IL-10

011
Category/
Type

FEC Identification Number

C C00495952

Transaction ID : D373647

Amount of Each Disbursement this Period

2500.00

Memo Item

Candidate Name

SCHNEIDER, BRADLEY SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: IL District: 10

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

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

7000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin For Senate

Mailing Address P.O. BOX 696

City
MADISON

State
WI

Zip Code
53701

Purpose of Disbursement
Senate - WI

Category/
Type

Candidate Name
BALDWIN, TAMMY, , ,

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

Disbursement For: 2017
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D373307

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Braxton Winston

Mailing Address PO Box 34397

City Charlotte State NC Zip Code 28234

Purpose of Disbursement City Council at large

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2017
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
10 / 10 / 2017

FEC Identification Number

Transaction ID : D373259
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Braxton Winston

Mailing Address PO Box 34397

City Charlotte State NC Zip Code 28234

Purpose of Disbursement Lost Check

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2017
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
11 / 02 / 2017

FEC Identification Number

Transaction ID : D373436
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Braxton Winston

Mailing Address PO Box 34397

City Charlotte State NC Zip Code 28234

Purpose of Disbursement City Council at large

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2017
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
11 / 01 / 2017

FEC Identification Number

Transaction ID : D373440
Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City
Washington

State
DC

Zip Code
20004

Purpose of Disbursement
BANK CHARGES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	03	/	2017

FEC Identification Number

C []

Transaction ID : D374151

Amount of Each Disbursement this Period

[] 20.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City
Washington

State
DC

Zip Code
20004

Purpose of Disbursement
BANK CHARGES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2017

FEC Identification Number

C []

Transaction ID : D374152

Amount of Each Disbursement this Period

[] 20.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City
Washington

State
DC

Zip Code
20004

Purpose of Disbursement
BANK CHARGES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

FEC Identification Number

C []

Transaction ID : D374153

Amount of Each Disbursement this Period

[] 20.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[] 60.00

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City
Washington

State
DC

Zip Code
20004

Purpose of Disbursement
BANK CHARGES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2017			

FEC Identification Number

C []

Transaction ID : D374154

Amount of Each Disbursement this Period

[] 20.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City
Washington

State
DC

Zip Code
20004

Purpose of Disbursement
BANK CHARGES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			04			2017			

FEC Identification Number

C []

Transaction ID : D374155

Amount of Each Disbursement this Period

[] 20.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City
Washington

State
DC

Zip Code
20004

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2017			

FEC Identification Number

C []

Transaction ID : D372989

Amount of Each Disbursement this Period

[] 39.95

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[] 79.95

TOTAL This Period (last page this line number only)..... ▶

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. FRIENDS OF TOM CULLERTON

Mailing Address P.O. BOX 7304

City Villa Park State IL Zip Code 60181

Purpose of Disbursement
Fundraiser Event - IL

Category/
Type

Candidate Name
CULLERTON, THOMAS, , ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) ▼
State: IL District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
11 / 15 / 2017

FEC Identification Number

Transaction ID : D373497
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Jacob Rosecrants

Mailing Address PO Box 1421

City Norman State OK Zip Code 73070-1421

Purpose of Disbursement
State Rep.- 2017 Special Election- HD 46

Category/
Type

Candidate Name
Rosecrants, Jacob, , ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) Special General
State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

FEC Identification Number

Transaction ID : D373262
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. KYRSTEN SINEMA FOR CONGRESS

Mailing Address PO BOX 25879

City TEMPE State AZ Zip Code 85285

Purpose of Disbursement
Senate - AZ

Category/
Type

Candidate Name
SINEMA, KYRSTEN, , ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) ▼
State: AZ District: 09

Date of Disbursement
M M / D D / Y Y Y Y Y Y
11 / 01 / 2017

FEC Identification Number
 C00508804
Transaction ID : D373428
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="4000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. NGP Software

Mailing Address 1101 15th St, NW Suite 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement
PAC SOFTWARE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2017

FEC Identification Number

C
Transaction ID : D374149
Amount of Each Disbursement this Period
1125.00

Memo Item

Full Name (Last, First, Middle Initial)

B. NGP Software

Mailing Address 1101 15th St, NW Suite 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement
NGP SOFTWARE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2017

FEC Identification Number

C
Transaction ID : D374150
Amount of Each Disbursement this Period
1125.00

Memo Item

Full Name (Last, First, Middle Initial)

C. People for Teresa Mosqueda

Mailing Address P.O. BOX 20655

City Seattle State WA Zip Code 98102

Purpose of Disbursement
Check voided/Exceeded allowed amount

Candidate Name
Mosqueda, Teresa, , ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) ▼
State: WA District:

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2017

FEC Identification Number

C
Transaction ID : D373446
Amount of Each Disbursement this Period
- 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. People for Teresa Mosqueda

Mailing Address P.O. BOX 20655

City
Seattle

State
WA

Zip Code
98102

Purpose of Disbursement
City Council - Seattle WA

011

Category/
Type

Candidate Name

Mosqueda, Teresa, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: WA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2017			

FEC Identification Number

C [REDACTED]

Transaction ID : D373448

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. People for Teresa Mosqueda

Mailing Address P.O. BOX 20655

City
Seattle

State
WA

Zip Code
98102

Purpose of Disbursement
City Council - Seattle WA

011

Category/
Type

Candidate Name

Mosqueda, Teresa, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify)

State: WA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2017			

FEC Identification Number

C [REDACTED]

Transaction ID : D373437

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Steven Vincent

Mailing Address 316 E. Charlotte Ter.

City
Mustang

State
OK

Zip Code
73064

Purpose of Disbursement
Senate - 2017 Special Election-District 45

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) ▼
Special General

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			22			2017			

FEC Identification Number

C [REDACTED]

Transaction ID : D373260

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 1250.00

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

A. WOLF, TOM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 22454

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement Governor of PA

Candidate Name

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 18 / 2017

FEC Identification Number: C

Transaction ID : D373310

Amount of Each Disbursement this Period: 5000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	12339.95