

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

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

ADDRESS (number and street) ▼

80 Eighth Avenue, Suite 610

☐ Check if different than previously reported. (ACC)

New York

NY

10011

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00007898

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☒ April 15 Quarterly Report (Q1)

☐ July 15 Quarterly Report (Q2)

☐ October 15 Quarterly Report (Q3)

☐ January 31 Year-End Report (YE)

☐ July 31 Mid-Year Report (Non-election Year Only) (MY)

☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

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

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

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

in the State of

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

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

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

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

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

in the State of

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

5. Covering Period

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

02

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

13

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

2014

through

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

03

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

31

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

2014

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

Type or Print Name of Treasurer Ms. Mary Mahoney

Signature of Treasurer

Ms. Mary Mahoney

[Electronically Filed]

Date

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

04

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

03

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

2014

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

Office  
Use  
Only

FEC FORM 3X  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

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

Report Covering the Period: From: M M / D D / Y Y Y Y Y 02 / 13 / 2014 To: M M / D D / Y Y Y Y Y 03 / 31 / 2014

|  | COLUMN A<br>This Period   | COLUMN B<br>Calendar Year-to-Date                                     |
|--|---|---|
| 6. (a) Cash on Hand<br>January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2014     |   | <span style="border: 1px solid black; padding: 2px;">815905.63</span> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <span style="border: 1px solid black; padding: 2px;">840347.03</span> |   |
| (c) Total Receipts (from Line 19) .....  | <span style="border: 1px solid black; padding: 2px;">5946.57</span>   | <span style="border: 1px solid black; padding: 2px;">87362.97</span>  |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <span style="border: 1px solid black; padding: 2px;">846293.60</span> | <span style="border: 1px solid black; padding: 2px;">903268.60</span> |
| 7. Total Disbursements (from Line 31) .....  | <span style="border: 1px solid black; padding: 2px;">9327.45</span>   | <span style="border: 1px solid black; padding: 2px;">66302.45</span>  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | <span style="border: 1px solid black; padding: 2px;">836966.15</span> | <span style="border: 1px solid black; padding: 2px;">836966.15</span> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <span style="border: 1px solid black; padding: 2px;">0.00</span>      |   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <span style="border: 1px solid black; padding: 2px;">0.00</span>      |   |



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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

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 |
| 0 | 2 |   | 1 | 3 |   | 2 | 0 | 1 | 4 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 1 | 4 |

**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).....

1079.60

28745.60

(ii) Unitemized .....

4789.38

58520.80

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

5868.98

87266.40

(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) .....

5868.98

87266.40

## 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.).....

77.59

96.57

## 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))..... ▶

5946.57

87362.97

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

5946.57

87362.97

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) 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 .....   | 0.00                          | 1225.00                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 0.00                          | 1225.00                           |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 5000.00                       | 55500.00                          |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements .....  | 4327.45                       | 9577.45                           |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 9327.45                       | 66302.45                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 9327.45                       | 66302.45                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 5868.98                       | 87266.40                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 5868.98                       | 87266.40                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 0.00                          | 1225.00                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 0.00                          | 1225.00                           |

# **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 11

☒ 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)

Full Name (Last, First, Middle Initial)

**A. Dennis R Arrington**

Mailing Address 2222 Bull St

City

Savannah

State

GA

Zip Code

31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Local 4873

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2014

Transaction ID : C6480740

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Cindy Diehm**

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

Local 4873

Occupation

Exec. Board

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2014

Transaction ID : C6480743

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Theatla Jones**

Mailing Address 2222 Bull St

City

Savannah

State

GA

Zip Code

31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local #4873

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2014

Transaction ID : C6480752

Amount of Each Receipt this Period

100.00

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

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

300.00

# **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 7 OF 11

☒ 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 (Last, First, Middle Initial)

## **A. Suzanne Mode**

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

LOCAL 8

Occupation

Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2014

Transaction ID : C6346212

Amount of Each Receipt this Period

9.60

Full Name (Last, First, Middle Initial)

## **B. Suzanne Mode**

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

LOCAL 8

Occupation

Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2014

Transaction ID : C6346713

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Suzanne Mode**

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

LOCAL 8

Occupation

Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2014

Transaction ID : C6480617

Amount of Each Receipt this Period

20.00

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

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

279.60

# **SCHEDULE A (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 11

☒ 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 (Last, First, Middle Initial)

**A. Aaron Sanders**

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

Local 512

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2014

Transaction ID : C6346705

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Becky Turner**

Mailing Address 704 Royal View Ct

City

Weatherford

State

TX

Zip Code

76086

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 277

Occupation

President/Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2014

Transaction ID : C6346702

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

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

500.00

1079.60



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 11

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. ALEX SINK FOR CONGRESS**

Mailing Address PO BOX 17271

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>CLEARWATER | State<br>FL | Zip Code<br>33762 |
|--------------------|-------------|-------------------|

Purpose of Disbursement  
Congress, FL, 13

Candidate Name

ALEX SINK

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 13

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03    |   | 06    |   | 2014      |

Transaction ID : D333854

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. CHRIS GIBSON FOR CONGRESS**

Mailing Address PO BOX 234

|                          |             |                   |
|--------------------------|-------------|-------------------|
| City<br>SARATOGA SPRINGS | State<br>NY | Zip Code<br>12866 |
|--------------------------|-------------|-------------------|

Purpose of Disbursement  
R-NY 19, Primary

Candidate Name

CHRISTOPHER P GIBSON

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 19

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03    |   | 28    |   | 2014      |

Transaction ID : D336011

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. JENNIFER GARRISON FOR CONGRESS**

Mailing Address 427 5TH ST

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>MARIETTA | State<br>OH | Zip Code<br>45750 |
|------------------|-------------|-------------------|

Purpose of Disbursement  
Congress, OH 06

Candidate Name

JENNIFER D GARRISON

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 06

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03    |   | 21    |   | 2014      |

Transaction ID : D335544

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

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

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

|         |
|---------|
| 5000.00 |
|---------|

|         |
|---------|
| 5000.00 |
|---------|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 11

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Richard T. Moore**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03    | / | 28    | / | 2014      |

Mailing Address State House Room 111

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Boston | MA    | 01233    |

**Transaction ID : D336013**Purpose of Disbursement  
Senate, Pres. MA

011

Amount of Each Disbursement this Period

Candidate Name

Richard T Moore

Category/  
Type

250.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA

District:

Full Name (Last, First, Middle Initial)

**B. Ed FitzGerald For Ohio**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03    | / | 11    | / | 2014      |

Mailing Address 340 E. Fulton Street

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Columbus | OH    | 43215    |

**Transaction ID : D335019**Purpose of Disbursement  
Governor, OH

011

Amount of Each Disbursement this Period

Candidate Name

Ed FitzGerald

Category/  
Type

2000.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH

District:

Full Name (Last, First, Middle Initial)

**C. Bob Gordon**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03    | / | 06    | / | 2014      |

Mailing Address PO Box 14

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Fair Lawn | NJ    | 07410    |

**Transaction ID : D334821**Purpose of Disbursement  
NJ Senate

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

500.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

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

|         |
|---------|
| 2750.00 |
|---------|

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 11

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Will Smith**

Mailing Address PO Box 8801

City  
Silver SpringState  
MDZip Code  
20907Purpose of Disbursement  
Delegate, District 20, MD

Candidate Name

011

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03    | / | 21    | / | 2014        |

Transaction ID : D335546

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. Susan Bonilla for Assembly**

Mailing Address 4425-C Treat Blvd #139

City  
ConcordState  
CAZip Code  
94521Purpose of Disbursement  
CA State Assembly, 14th

Candidate Name

Susan Bonilla

011

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 14

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02    | / | 14    | / | 2014        |

Transaction ID : D334143

Amount of Each Disbursement this Period

|        |
|--------|
| 500.00 |
|--------|

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

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

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

1500.00

4250.00