



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
One Voice

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		3979.26
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	8364.03									
(c) Total Receipts (from Line 19) .....	1509.48	12099.48								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	9873.51	16078.74								
7. Total Disbursements (from Line 31) .....	1503.68	7708.91								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	8369.83	8369.83								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
One Voice

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	75.00	10075.00
(ii) Unitemized .....	1410.00	2000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1485.00	12075.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	1485.00	12075.00
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) .....	24.48	24.48
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1509.48	12099.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1509.48	12099.48

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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.....	1503.68	4708.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1503.68	4708.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	3000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1503.68	7708.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1503.68	7708.91

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	1485.00	12075.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1485.00	12075.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1503.68	4708.91
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	24.48	24.48
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1479.20	4684.43

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 9  
(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)  
One Voice

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

Mailing Address 12257 Silva PI

City State Zip Code  
Cerritos CA 90703-7651

FEC ID number of contributing federal political committee. C

Name of Employer PPLA      Occupation Healthcare Administrator

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 08 / 2010  
**Transaction ID:** C3289256

Amount of Each Receipt this Period 25.00

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

Mailing Address 12257 Silva PI

City State Zip Code  
Cerritos CA 90703-7651

FEC ID number of contributing federal political committee. C

Name of Employer PPLA      Occupation Healthcare Administrator

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 08 / 2010  
**Transaction ID:** C3320579

Amount of Each Receipt this Period 25.00

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

Mailing Address 12257 Silva PI

City State Zip Code  
Cerritos CA 90703-7651

FEC ID number of contributing federal political committee. C

Name of Employer PPLA      Occupation Healthcare Administrator

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 09 / 2010  
**Transaction ID:** C3369438

Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... 75.00

**TOTAL** This Period (last page this line number only) ..... 75.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
One Voice

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) NGP Software, Inc.</p> <hr/> <p>Mailing Address 1225 I St NW Ste 1225</p> <hr/> <p>City Washington State DC Zip Code 20005-5918</p> <hr/> <p>Purpose of Disbursement Campaign software Candidate Name</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">001 Category/ Type</div> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D219448 <b>Date of Disbursement</b></p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0</div> <hr/> <p><b>Amount of Each Disbursement this Period</b></p> <div style="border: 1px solid black; padding: 5px; text-align: center;">300.00</div>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Patrick J. Kozlowski Accountancy Corp.</p> <hr/> <p>Mailing Address 1127 11th St Ste 225</p> <hr/> <p>City Sacramento State CA Zip Code 95814-3809</p> <hr/> <p>Purpose of Disbursement Committee accounting service Candidate Name</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">001 Category/ Type</div> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D219444 <b>Date of Disbursement</b></p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0</div> <hr/> <p><b>Amount of Each Disbursement this Period</b></p> <div style="border: 1px solid black; padding: 5px; text-align: center;">225.00</div>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Patrick J. Kozlowski Accountancy Corp.</p> <hr/> <p>Mailing Address 1127 11th St Ste 225</p> <hr/> <p>City Sacramento State CA Zip Code 95814-3809</p> <hr/> <p>Purpose of Disbursement Committee Accounting Service Candidate Name</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">001 Category/ Type</div> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D204433 <b>Date of Disbursement</b></p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 1 0</div> <hr/> <p><b>Amount of Each Disbursement this Period</b></p> <div style="border: 1px solid black; padding: 5px; text-align: center;">100.00</div>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div style="border: 1px solid black; padding: 5px; display: inline-block;">625.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> </div>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
One Voice

A.	Full Name (Last, First, Middle Initial) Patrick J. Kozlowski Accountancy Corp.	Transaction ID: D215314 Date of Disbursement 07 / 19 / 2010
	Mailing Address 1127 11th St Ste 225	Amount of Each Disbursement this Period 279.78
	City Sacramento State CA Zip Code 95814-3809	
	Purpose of Disbursement Committee accounting Service	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Patrick J. Kozlowski Accountancy Corp.	Transaction ID: D217752 Date of Disbursement 08 / 18 / 2010
	Mailing Address 1127 11th St Ste 225	Amount of Each Disbursement this Period 400.00
	City Sacramento State CA Zip Code 95814-3809	
	Purpose of Disbursement Committee accounting service	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) U.S. Bank	Transaction ID: D218766 Date of Disbursement 09 / 01 / 2010
	Mailing Address 621 Capitol Mall #110	Amount of Each Disbursement this Period 55.00
	City Sacramento State CA Zip Code 95814	
	Purpose of Disbursement Credit card fee	003 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>734.78</b>
<b>TOTAL</b> 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)

PAGE 9 / 9

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

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NAME OF COMMITTEE (In Full)  
One Voice

<b>A.</b> Full Name (Last, First, Middle Initial) U.S. Bank Mailing Address 621 Capitol Mall #110 City Sacramento State CA Zip Code 95814 Purpose of Disbursement Credit card fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D217240 Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2010
	Amount of Each Disbursement this Period 88.90 Category/Type 003
<b>B.</b> Full Name (Last, First, Middle Initial) U.S. Bank Mailing Address 621 Capitol Mall #110 City Sacramento State CA Zip Code 95814 Purpose of Disbursement Credit card fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D204398 Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2010
	Amount of Each Disbursement this Period 55.00 Category/Type 003

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

143.90

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

1503.68