

**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**

**One Voice**

ADDRESS (number and street) **PO Box 65322**

Check if different than previously reported. (ACC) **Washington DC 20035**

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

**C** **C00403071** 3. IS THIS REPORT NEW OR AMENDED (N) (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),  Mar 20 (M3),  Apr 20 (M4),  May 20 (M5),  Jun 20 (M6),  Jul 20 (M7),  Aug 20 (M8),  Sep 20 (M9),  Oct 20 (M10),  Nov 20 (M11) (Non-Election Year Only),  Dec 20 (M12) (Non-Election Year Only),  Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:  Primary (12P),  General (12G),  Runoff (12R),  Convention (12C),  Special (12S)

Election on **11** / **06** / **2018** in the State of **CA**

(d) 30-Day POST-Election Report for the:  General (30G),  Runoff (30R),  Special (30S)

Election on / / in the State of

5. Covering Period **10** / **01** / **2018** through **10** / **17** / **2018**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Moore, Darryl, , Mr.,  
Type or Print Name of Treasurer

Signature of Treasurer **Moore, Darryl, , Mr.,** [Electronically Filed] Date **10** / **25** / **2018**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

One Voice

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		32022.61
(b) Cash on Hand at Beginning of Reporting Period.....	12362.69	
(c) Total Receipts (from Line 19) .....	13800.00	66627.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	26162.69	98649.61
7. Total Disbursements (from Line 31).....	11904.72	84391.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	14257.97	14257.97
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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**One Voice**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13750.00	66575.00
(ii) Unitemized .....	50.00	52.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	13800.00	66627.00
(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) .....	13800.00	66627.00
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).....	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.).....	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 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)).....▶	13800.00	66627.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	13800.00	66627.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	3904.72	14191.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3904.72	14191.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5500.00	67700.00
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	0.00
(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 (Including Non-Federal Donations).....	2500.00	2500.00
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)) ..	11904.72	84391.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11904.72	84391.64

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	13800.00	66627.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13800.00	66627.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3904.72	14191.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3904.72	14191.64

**SCHEDULE A (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 12
	<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)  
**One Voice**

**A. Gooding, John, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6363 Christie Ave  
 City Emeryville State CA Zip Code 94608-1914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MILO Group Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 10 / 2018  
**Transaction ID : VN8DMK2E3Y9**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**B. Keefe, James, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1333 Jones St Unit 1705  
 City San Francisco State CA Zip Code 94109-4119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gateway Bank Occupation (for Individual) Banking  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : VN8DMJZ1ZA3**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**c. Law Office Of Robert J. Begley**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 655 Redwood Hwy Ste 300  
 City Mill Valley State CA Zip Code 94941-3057  
 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 ▼ 250.00

Date of Receipt 10 / 10 / 2018  
**Transaction ID : VN8DMK2E462**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7750.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (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 12
	<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)  
**One Voice**

**A. McElwee, Alistair, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 8400  
 City Emeryville State CA Zip Code 94662-0400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Quadric Group Inc. Occupation (for Individual) Operations Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 10 / 2018  
**Transaction ID : VN8DMK2E3R1**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Orozco, Luis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2120 Broadview Ter  
 City Los Angeles State CA Zip Code 90068-3137  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Academia Cultural Occupation (for Individual) Literary Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 07 / 2018  
**Transaction ID : VN8DMJYD490**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**C. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 10 / 2018  
**Transaction ID : VN8DMJYD490E**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	13750.00

**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"/> 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**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address PO Box 390728

City  
Cambridge

State  
MA

Zip Code  
02139-0008

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 09 / 2018

FEC Identification Number

C  
Transaction ID : VN7ECABZB  
Amount of Each Disbursement this Period  
197.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. Chase Card Services**

Mailing Address PO Box 1423

City  
Charlotte

State  
NC

Zip Code  
28201-1423

Purpose of Disbursement  
Credit Card Payment (See Below)

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 12 / 2018

FEC Identification Number

C  
Transaction ID : VN7ECAC3H1  
Amount of Each Disbursement this Period  
3707.22

Memo Item

Full Name (Last, First, Middle Initial)

**C. Alaska Air**

Mailing Address PO Box 68900  
- SEAZI

City  
Seattle

State  
WA

Zip Code  
98168-0900

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 13 / 2018

FEC Identification Number

C  
Transaction ID : VN7ECAC3J  
Amount of Each Disbursement this Period  
698.20

Memo Item

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

3904.72

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



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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**

Full Name (Last, First, Middle Initial)

**A. Avis Rent-A-Car**

Mailing Address 1805 E Sky Harbor Cir S

City Phoenix State AZ Zip Code 85034-4805

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2018

FEC Identification Number

C  
Transaction ID : VN7ECAC3Jc  
Amount of Each Disbursement this Period  
296.72

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hyatt Hotels**

Mailing Address 151 W 5Th St

City Cincinnati State OH Zip Code 45202-2703

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2018

FEC Identification Number

C  
Transaction ID : VN7ECAC3J1  
Amount of Each Disbursement this Period  
514.16

Memo Item

Full Name (Last, First, Middle Initial)

**C. Marriott - Baltimore**

Mailing Address 110 S Eutaw St

City Baltimore State MD Zip Code 21201-1608

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2018

FEC Identification Number

C  
Transaction ID : VN7ECAC3H  
Amount of Each Disbursement this Period  
1774.72

Memo Item

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

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

0.00

3904.72

**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)

**One Voice**

Full Name (Last, First, Middle Initial)

**A. Carolyn For Congress**

Mailing Address PO Box 301

City  
Suwanee

State  
GA

Zip Code  
30024-0301

Purpose of Disbursement  
Contribution Made

Candidate Name

**Bourdeaux, Carolyn, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: GA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2018			

FEC Identification Number

**C** C00649376

**Transaction ID : VN7ECAC3H!**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Debbie For Congress**

Mailing Address PO Box 566442

City  
Miami

State  
FL

Zip Code  
33256-6442

Purpose of Disbursement  
Contribution Made

Candidate Name

**Mucarsel-Powell, Debbie, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: FL District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2018			

FEC Identification Number

**C** C00652065

**Transaction ID : VN7ECAC3G!**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Kirkpatrick For Congress**

Mailing Address PO Box 3015

City  
Tucson

State  
AZ

Zip Code  
85702-3015

Purpose of Disbursement  
Contribution Made

Candidate Name

**Kirkpatrick, Ann, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: AZ District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

**C** C00651042

**Transaction ID : VN7ECAC5Q**

Amount of Each Disbursement this Period

2000.00

Memo Item

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

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
**One Voice**

**A. Pingree For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 17613

City Portland State ME Zip Code 04112-8613

Purpose of Disbursement Contribution Made

Candidate Name Pingree, Chellie, , ,

Office Sought:  House  Senate  President  
State: ME District: 01

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 12 / 2018

FEC Identification Number: C000433391  
Transaction ID : VN7ECAC3H  
Amount of Each Disbursement this Period: 1500.00

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  
State: District:

Disbursement For:  Primary  General  Other (specify)

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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5500.00

**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)  
**One Voice**

**A. Stacey Abrams For Governor**

Full Name (Last, First, Middle Initial)

Mailing Address 1270 Caroline St NE  
Ste D120-447

City Atlanta State GA Zip Code 30307-2758

Purpose of Disbursement  
Donation Made

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 12 / 2018

FEC Identification Number  
C

Transaction ID : VN7ECAC3G

Amount of Each Disbursement this Period  
2500.00

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  
State: District:

Disbursement For:  Primary  General  
 Other (specify)

Category/Type

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

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  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00