

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="828183.17"/>	<input type="text" value="828183.17"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="828183.17"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="185432.89"/>	<input type="text" value="185432.89"/>
(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="1013616.06"/>	<input type="text" value="1013616.06"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="22190.20"/>	<input type="text" value="22190.20"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="991425.86"/>	<input type="text" value="991425.86"/>
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 01 / 01 / 2017 To: M M / D D / Y Y Y Y 06 / 30 / 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).....	71111.78	71111.78
(ii) Unitemized	114070.30	114070.30
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	185182.08	185182.08
(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)	185182.08	185182.08
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.).....	250.81	250.81
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)).....▶	185432.89	185432.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	185432.89	185432.89

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	5250.00	5250.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5250.00	5250.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	2000.00
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	0.50	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)).....	0.50	0.50
29. Other Disbursements (Including Non-Federal Donations).....	14939.70	14939.70
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)) ..	22190.20	22190.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22190.20	22190.20

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	185182.08	185182.08
34. Total Contribution Refunds (from Line 28(d))	0.50	0.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	185181.58	185181.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5250.00	5250.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5250.00	5250.00

**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 218
	<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. Aguirre, Rosalinda, , ,			Date of Receipt MM / DD / YYYY 01 / 24 / 2017
Mailing Address 7017 Greenwood Avenue N., #204			Transaction ID : C7213617
City Seattle	State WA	Zip Code 98103	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) Local 8		Occupation (for Individual) Recording Sec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Aguirre, Rosalinda, , ,			Date of Receipt MM / DD / YYYY 02 / 10 / 2017
Mailing Address 7017 Greenwood Avenue N., #204			Transaction ID : C7227696
City Seattle	State WA	Zip Code 98103	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) Local 8		Occupation (for Individual) Recording Sec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Aguirre, Rosalinda, , ,			Date of Receipt MM / DD / YYYY 02 / 27 / 2017
Mailing Address 7017 Greenwood Avenue N., #204			Transaction ID : C7232323
City Seattle	State WA	Zip Code 98103	Amount of Each Receipt this Period 170.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) Local 8		Occupation (for Individual) Recording Sec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 350.00	

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 7 OF 218
	<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. Aguirre, Rosalinda, , ,			Date of Receipt MM / DD / YYYY 03 / 28 / 2017
Mailing Address 7017 Greenwood Avenue N., #204			Transaction ID : C7247959
City Seattle	State WA	Zip Code 98103	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) Local 8		Occupation (for Individual) Recording Sec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Aguirre, Rosalinda, , ,			Date of Receipt MM / DD / YYYY 04 / 07 / 2017
Mailing Address 7017 Greenwood Avenue N., #204			Transaction ID : C7249161
City Seattle	State WA	Zip Code 98103	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) Local 8		Occupation (for Individual) Recording Sec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Aguirre, Rosalinda, , ,			Date of Receipt MM / DD / YYYY 05 / 08 / 2017
Mailing Address 7017 Greenwood Avenue N., #204			Transaction ID : C7267271
City Seattle	State WA	Zip Code 98103	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) Local 8		Occupation (for Individual) Recording Sec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 350.00	

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 8 OF 218
	<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 ▼ 350.00

Date of Receipt 06 / 15 / 2017
Transaction ID : C7273311
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7220190
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7220191
 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 9 OF 218
	<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. 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7220195
 Amount of Each Receipt this Period 100.00
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7256237
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7256238
 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 10 OF 218
<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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2017

Transaction ID : C7256239

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 ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2017

Transaction ID : C7226604

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
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2017

Transaction ID : C7232647

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 11 OF 218
	<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 03 / 28 / 2017
Mailing Address 7419 Cuvier St.			Transaction ID : C7248142
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 ▼ 260.00	

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 04 / 24 / 2017
Mailing Address 7419 Cuvier St.			Transaction ID : C7263565
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 ▼ 260.00	

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 05 / 22 / 2017
Mailing Address 7419 Cuvier St.			Transaction ID : C7268406
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 ▼ 260.00	

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 12 OF 218
	<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 MM / DD / YYYY 06 / 19 / 2017 Transaction ID : C7273630		
Mailing Address 7419 Cuvier St.			Amount of Each Receipt this Period 50.00		
City La Jolla	State CA	Zip Code 92037	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
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 ▼ 260.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ALTIG, RICHARD, JR, ,			Date of Receipt MM / DD / YYYY 01 / 30 / 2017 Transaction ID : C7223436		
Mailing Address PO BOX 208			Amount of Each Receipt this Period 416.00		
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) 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 ▼ 2496.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ALTIG, RICHARD, JR, ,			Date of Receipt MM / DD / YYYY 01 / 30 / 2017 Transaction ID : C7223437		
Mailing Address PO BOX 208			Amount of Each Receipt this Period 416.00		
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) 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 ▼ 2496.00			

SUBTOTAL of Receipts This Page (optional).....▶	882.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (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 218
	<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 ▼
2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7223438

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 ▼
2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7257865

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 ▼
2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7257866

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 14 OF 218
	<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 ▼ 2496.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7257867
 Amount of Each Receipt this Period 416.00
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217565
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217566
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	616.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 218
<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.

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 : C7217570

Amount of Each Receipt this Period

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.

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 : C7254110

Amount of Each Receipt this Period

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.

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 : C7254111

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 16 OF 218
	<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 ▼ 600.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7254112
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Arony, Malka, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3217 E Tonto Ln
 City Phoenix State AZ Zip Code 85050
 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 **01 / 30 / 2017**
Transaction ID : C7226475
 Amount of Each Receipt this Period 150.00
 Memo Item

C. Arony, Malka, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3217 E Tonto Ln
 City Phoenix State AZ Zip Code 85050
 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 **04 / 24 / 2017**
Transaction ID : C7253361
 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 17 OF 218
	<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. **C**

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

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
01	/	24	/	2017

Transaction ID : C7213678

Amount of Each Receipt this Period
100.00

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. **C**

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

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
02	/	27	/	2017

Transaction ID : C7232764

Amount of Each Receipt this Period
100.00

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. **C**

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

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
03	/	08	/	2017

Transaction ID : C7235905

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 18 OF 218
	<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. **C**

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

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
04		07		2017

Transaction ID : C7249174

Amount of Each Receipt this Period
100.00

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. **C**

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

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
05		04		2017

Transaction ID : C7267148

Amount of Each Receipt this Period
100.00

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. **C**

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

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
06		05		2017

Transaction ID : C7269600

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 19 OF 218
	<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. BAH, SOULEYMANE, T, ,			Date of Receipt MM / DD / YYYY 01 / 30 / 2017 Transaction ID : C7223144		
Mailing Address 2370 MAGNOLIA TERR			Amount of Each Receipt this Period 100.00		
City HARRISBURG	State PA	Zip Code 17110	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 600.00		
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) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BAH, SOULEYMANE, T, ,			Date of Receipt MM / DD / YYYY 01 / 30 / 2017 Transaction ID : C7223145		
Mailing Address 2370 MAGNOLIA TERR			Amount of Each Receipt this Period 100.00		
City HARRISBURG	State PA	Zip Code 17110	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 600.00		
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) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BAH, SOULEYMANE, T, ,			Date of Receipt MM / DD / YYYY 01 / 30 / 2017 Transaction ID : C7223146		
Mailing Address 2370 MAGNOLIA TERR			Amount of Each Receipt this Period 100.00		
City HARRISBURG	State PA	Zip Code 17110	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 600.00		
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)					

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 20 OF 218
<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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7257741
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7257742
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7257743
 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 21 OF 218
	<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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7220553

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7220554

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7220555

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 22 OF 218
	<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. 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
 Transaction ID : C7256447
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
 Transaction ID : C7256448
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
 Transaction ID : C7256449
 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 23 OF 218
	<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. 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 ▼ 600.00

Date of Receipt 01 / 24 / 2017
Transaction ID : C7213679
 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 ▼ 600.00

Date of Receipt 02 / 27 / 2017
Transaction ID : C7232780
 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 ▼ 600.00

Date of Receipt 03 / 08 / 2017
Transaction ID : C7235906
 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 218
<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 04 / 07 / 2017
Mailing Address 3201 Cherry Ridge St.,Ste.A109			Transaction ID : C7249175
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 ▼ 600.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bailey, Lena, , ,			Date of Receipt MM / DD / YYYY 05 / 04 / 2017
Mailing Address 3201 Cherry Ridge St.,Ste.A109			Transaction ID : C7267149
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 ▼ 600.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Bailey, Lena, , ,			Date of Receipt MM / DD / YYYY 06 / 05 / 2017
Mailing Address 3201 Cherry Ridge St.,Ste.A109			Transaction ID : C7269601
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 ▼ 600.00		

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 25 OF 218
	<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. Baxter, Michelle, M, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 30 / 2017		
Mailing Address PO Box 208			Transaction ID : C7226513		
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 ▼ 300.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Baxter, Michelle, M, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2017		
Mailing Address PO Box 208			Transaction ID : C7254117		
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 ▼ 300.00			

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 01 / 30 / 2017		
Mailing Address 4704 Saratoga Falls Ln			Transaction ID : C7216908		
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 ▼ 600.00			

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 26 OF 218
	<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. Bitman, Yaroslav, , ,			Date of Receipt
Mailing Address 4704 Saratoga Falls Ln			<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City Raleigh	State NC	Zip Code 27614	Transaction ID : C7216909
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 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"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bitman, Yaroslav, , ,			Date of Receipt
Mailing Address 4704 Saratoga Falls Ln			<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City Raleigh	State NC	Zip Code 27614	Transaction ID : C7216910
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 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"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Bitman, Yaroslav, , ,			Date of Receipt
Mailing Address 4704 Saratoga Falls Ln			<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Raleigh	State NC	Zip Code 27614	Transaction ID : C7253416
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 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="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 27 OF 218
	<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. Bitman, Yaroslav, , ,			Date of Receipt
Mailing Address 4704 Saratoga Falls Ln			<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Raleigh	State NC	Zip Code 27614	Transaction ID : C7253417
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 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"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bitman, Yaroslav, , ,			Date of Receipt
Mailing Address 4704 Saratoga Falls Ln			<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Raleigh	State NC	Zip Code 27614	Transaction ID : C7253418
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 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"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BROWN, DORIAN, P, ,			Date of Receipt
Mailing Address 1706 15TH ST NW			<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City WINTER HAVEN	State FL	Zip Code 33881	Transaction ID : C7217710
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) 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="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 28 OF 218
	<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. 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217711
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217712
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7254255
 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 29 OF 218
<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. 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 ▼ 600.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7254259
 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 ▼ 600.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7254260
 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 ▼ 600.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7218104
 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 30 OF 218
	<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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7218105
 Amount of Each Receipt this Period 100.00
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7218106
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7254620
 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 31 OF 218
	<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. 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 ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017

Transaction ID : C7254621

Amount of Each Receipt this Period
100.00

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 ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017

Transaction ID : C7254622

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 ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017

Transaction ID : C7217414

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 32 OF 218
	<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. CHUI, SAMANTHA, X, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 30 / 2017		
Mailing Address 2327 TALLAPOOSA DR			Transaction ID : C7217415		
City DULUTH	State GA	Zip Code 30097	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) National 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 ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CHUI, SAMANTHA, X, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 30 / 2017		
Mailing Address 2327 TALLAPOOSA DR			Transaction ID : C7217416		
City DULUTH	State GA	Zip Code 30097	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) National 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 ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CHUI, SAMANTHA, X, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2017		
Mailing Address 2327 TALLAPOOSA DR			Transaction ID : C7253962		
City DULUTH	State GA	Zip Code 30097	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) National 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 ▼ 600.00			

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 33 OF 218
	<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. CHUI, SAMANTHA, X, ,			Date of Receipt		
Mailing Address 2327 TALLAPOOSA DR			M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2017		
City DULUTH	State GA	Zip Code 30097	Transaction ID : C7253963		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00		
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 ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CHUI, SAMANTHA, X, ,			Date of Receipt		
Mailing Address 2327 TALLAPOOSA DR			M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2017		
City DULUTH	State GA	Zip Code 30097	Transaction ID : C7253964		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00		
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 ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CLECKNER, JARED, , ,			Date of Receipt		
Mailing Address 14220 W 123RD TER			M M M / D D D / Y Y Y Y Y Y 01 / 30 / 2017		
City OLATHE	State KS	Zip Code 66062	Transaction ID : C7217719		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00		
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 ▼ 600.00			

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 34 OF 218
	<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. CLECKNER, JARED, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 30 / 2017		
Mailing Address 14220 W 123RD TER			Transaction ID : C7217720		
City OLATHE	State KS	Zip Code 66062	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 ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CLECKNER, JARED, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 30 / 2017		
Mailing Address 14220 W 123RD TER			Transaction ID : C7217721		
City OLATHE	State KS	Zip Code 66062	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 ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CLECKNER, JARED, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2017		
Mailing Address 14220 W 123RD TER			Transaction ID : C7254264		
City OLATHE	State KS	Zip Code 66062	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 ▼ 600.00			

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 35 OF 218
	<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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7254265
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7254266
 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 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7217310
 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 36 OF 218
	<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. 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 600.00

Date of Receipt 01 / 30 / 2017
 Transaction ID : C7217311
 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 600.00

Date of Receipt 01 / 30 / 2017
 Transaction ID : C7217312
 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 600.00

Date of Receipt 04 / 24 / 2017
 Transaction ID : C7253852
 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 218
	<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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7253853
 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 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7253854
 Amount of Each Receipt this Period
 100.00
 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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7223448
 Amount of Each Receipt this Period
 150.00
 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 38 OF 218
<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. 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 ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2017

Transaction ID : C7223449

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 ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2017

Transaction ID : C7223450

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 ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2017

Transaction ID : C7257877

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 39 OF 218
	<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. 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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7257878
 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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7257879
 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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7217366
 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 40 OF 218
<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. 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 ▼ 900.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217367
 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 ▼ 900.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217368
 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 ▼ 900.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7253910
 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 41 OF 218
	<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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7253911
 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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7253912
 Amount of Each Receipt this Period
 150.00
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2017
Transaction ID : C7213683
 Amount of Each Receipt this Period
 100.00
 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 42 OF 218
	<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. 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 ▼ 600.00

Date of Receipt **02 / 27 / 2017**
Transaction ID : C7232769
 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 ▼ 600.00

Date of Receipt **03 / 08 / 2017**
Transaction ID : C7235910
 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 ▼ 600.00

Date of Receipt **04 / 07 / 2017**
Transaction ID : C7249179
 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 43 OF 218
	<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. 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 ▼ 600.00

Date of Receipt **05 / 04 / 2017**
Transaction ID : C7267153
 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 ▼ 600.00

Date of Receipt **06 / 05 / 2017**
Transaction ID : C7269605
 Amount of Each Receipt this Period 100.00
 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. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7218806
 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 44 OF 218
	<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. 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. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7218807
 Amount of Each Receipt this Period 100.00
 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. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7218808
 Amount of Each Receipt this Period 100.00
 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. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7255258
 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 45 OF 218
<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. COOK, RANDALL, D, ,		Date of Receipt
Mailing Address 12224 SUTTERS HILL CT		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City CHARLOTTE	State NC	Zip Code 28269
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7255259
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 ▼ <input type="text" value="520.00"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. COOK, RANDALL, D, ,		Date of Receipt
Mailing Address 12224 SUTTERS HILL CT		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City CHARLOTTE	State NC	Zip Code 28269
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7255260
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 ▼ <input type="text" value="520.00"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CROWE, NIGEL, A, ,		Date of Receipt
Mailing Address 16611 HIGHLAND SUMMIT DR		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City WILDWOOD	State MO	Zip Code 63011
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7217556
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 ▼ <input type="text" value="600.00"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
<input type="checkbox"/> 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 46 OF 218
	<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
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 ▼
600.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2017

Transaction ID : **C7217557**

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
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 ▼
600.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2017

Transaction ID : **C7217558**

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
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 ▼
600.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2017

Transaction ID : **C7254101**

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 47 OF 218
	<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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7254102
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7254103
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7222194
 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 48 OF 218
	<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. 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 ▼ 300.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7222195
 Amount of Each Receipt this Period 50.00
 Memo Item

B. 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 ▼ 300.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7222196
 Amount of Each Receipt this Period 50.00
 Memo Item

C. 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 ▼ 300.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7257274
 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 50 OF 218
	<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. Davis, Kevin, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 30 / 2017
Mailing Address 15 Morning Breeze Ct			Transaction ID : C7217335
City Silver Springs	State MD	Zip Code 20904	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 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 ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Davis, Kevin, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 30 / 2017
Mailing Address 15 Morning Breeze Ct			Transaction ID : C7217336
City Silver Springs	State MD	Zip Code 20904	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 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 ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Davis, Kevin, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2017
Mailing Address 15 Morning Breeze Ct			Transaction ID : C7253876
City Silver Springs	State MD	Zip Code 20904	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 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 ▼ 600.00	

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 51 OF 218
	<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. 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7253877
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7253878
 Amount of Each Receipt this Period 100.00
 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 ▼ 240.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7219178
 Amount of Each Receipt this Period 40.00
 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 52 OF 218
	<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. 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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7219179

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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7219180

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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7255534

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 53 OF 218
	<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. 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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2017

Transaction ID : C725535

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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2017

Transaction ID : C725536

Amount of Each Receipt this Period
40.00

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2017

Transaction ID : C7217693

Amount of Each Receipt this Period
100.00

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 54 OF 218
	<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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7217694

Amount of Each Receipt this Period
100.00

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7217695

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7254233

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 55 OF 218
	<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. 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7254234
 Amount of Each Receipt this Period
 100.00
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7254235
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2017
Transaction ID : C7213684
 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 56 OF 218
	<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 ▼ 600.00

Date of Receipt **02 / 27 / 2017**
Transaction ID : C7232767
 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 ▼ 600.00

Date of Receipt **03 / 08 / 2017**
Transaction ID : C7235911
 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 ▼ 600.00

Date of Receipt **04 / 07 / 2017**
Transaction ID : C7249180
 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 57 OF 218
	<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 ▼ 600.00

Date of Receipt **05 / 04 / 2017**
Transaction ID : C7267154
 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 ▼ 600.00

Date of Receipt **06 / 05 / 2017**
Transaction ID : C7269606
 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 ▼ 600.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7217534
 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 58 OF 218
	<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 : C7217535

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 : C7217536

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 : C7254087

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 59 OF 218
	<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. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7254088
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7254089
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Donna, Shaffer, , ,
 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) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.12

Date of Receipt 01 / 24 / 2017
Transaction ID : C7213713
 Amount of Each Receipt this Period 38.48
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	238.48
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 60 OF 218
	<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. Donna, Shaffer, , ,			Date of Receipt
Mailing Address 17609 N 8th Ave			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City Phoenix	State AZ	Zip Code 85023-2604	Transaction ID : C7231659
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.72"/>
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="250.12"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Donna, Shaffer, , ,			Date of Receipt
Mailing Address 17609 N 8th Ave			<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2017"/>
City Phoenix	State AZ	Zip Code 85023-2604	Transaction ID : C7267170
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="76.96"/>
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="250.12"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Donna, Shaffer, , ,			Date of Receipt
Mailing Address 17609 N 8th Ave			<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City Phoenix	State AZ	Zip Code 85023-2604	Transaction ID : C7269170
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="38.48"/>
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="250.12"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="173.16"/>
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 61 OF 218
<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. Donna, Shaffer, , ,
 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) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2017
Transaction ID : C7272676
 Amount of Each Receipt this Period
 38.48
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7218202
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7218203
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	238.48
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 62 OF 218
	<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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7218204

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7254712

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7254713

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 63 OF 218
	<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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
 Transaction ID : C7254714
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
 Transaction ID : C7218540
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
 Transaction ID : C7218541
 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 64 OF 218
<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.

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 : C7218542

Amount of Each Receipt this Period

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.

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 : C7255023

Amount of Each Receipt this Period

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.

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 : C7255024

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 65 OF 218
<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.

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 : C7255025

Amount of Each Receipt this Period

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.

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 : C7220611

Amount of Each Receipt this Period

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.

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 : C7220612

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 66 OF 218
	<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. EZERNACK, DEBBIE, J, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 30 / 2017 Transaction ID : C7220613		
Mailing Address 3306 KINGSFORD PL			Amount of Each Receipt this Period 100.00		
City BOSSIER CITY	State LA	Zip Code 71112	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
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 ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. EZERNACK, DEBBIE, J, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2017 Transaction ID : C7256489		
Mailing Address 3306 KINGSFORD PL			Amount of Each Receipt this Period 100.00		
City BOSSIER CITY	State LA	Zip Code 71112	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
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 ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. EZERNACK, DEBBIE, J, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2017 Transaction ID : C7256490		
Mailing Address 3306 KINGSFORD PL			Amount of Each Receipt this Period 100.00		
City BOSSIER CITY	State LA	Zip Code 71112	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
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 ▼ 600.00			

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 67 OF 218
	<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 ▼ 600.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7256491
 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 ▼ 302.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7224455
 Amount of Each Receipt this Period 2.00
 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 ▼ 302.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7258542
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	202.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 218
	<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. 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 ▼ 302.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7258543
 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 ▼ 302.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7258547
 Amount of Each Receipt this Period 100.00
 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 Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 01 / 30 / 2017
Transaction ID : C7224893
 Amount of Each Receipt this Period 41.67
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	241.67
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (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 218
	<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. 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 Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.02

Date of Receipt 01 / 30 / 2017
 Transaction ID : C7224894
 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 Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.02

Date of Receipt 01 / 30 / 2017
 Transaction ID : C7224895
 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 Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.02

Date of Receipt 04 / 24 / 2017
 Transaction ID : C7258914
 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 70 OF 218
	<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 Ins. Occupation (for Individual) Insurance Agent
 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
 04 / 24 / 2017
Transaction ID : C7258915
 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 Ins. Occupation (for Individual) Insurance Agent
 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
 04 / 24 / 2017
Transaction ID : C7258916
 Amount of Each Receipt this Period
 41.67
 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7218348
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	283.34
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 218
	<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. 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 ▼ 1200.00

Date of Receipt
 01 / 30 / 2017
Transaction ID : C7218349
 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 ▼ 1200.00

Date of Receipt
 01 / 30 / 2017
Transaction ID : C7218353
 Amount of Each Receipt this Period 200.00
 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 ▼ 1200.00

Date of Receipt
 04 / 24 / 2017
Transaction ID : C7254841
 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 72 OF 218
	<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. FOTI, DONALD, , ,			Date of Receipt
Mailing Address PO BOX 2500			<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City NAPA	State CA	Zip Code 94558	Transaction ID : C7254842
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="200.00"/>
Name of Employer (for Individual) American Income Life Insurance		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="1200.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FOTI, DONALD, , ,			Date of Receipt
Mailing Address PO BOX 2500			<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City NAPA	State CA	Zip Code 94558	Transaction ID : C7254843
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="200.00"/>
Name of Employer (for Individual) American Income Life Insurance		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="1200.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Fuldauer, Susan, , ,			Date of Receipt
Mailing Address 7229 Kingman Cir			<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City Indianapolis	State IN	Zip Code 46256	Transaction ID : C7226481
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="300.00"/>
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="700.00"/>
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 73 OF 218
	<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. Fuldauer, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7229 Kingman Cir
 City Indianapolis State IN Zip Code 46256
 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 04 / 24 / 2017
Transaction ID : C7253409
 Amount of Each Receipt this Period 300.00
 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. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7218998
 Amount of Each Receipt this Period 100.00
 Memo Item

C. 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. **C**
 Name of Employer (for Individual) American Income Life Insurance Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7219002
 Amount of Each Receipt this Period 100.00
 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 74 OF 218
	<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. 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. **C**

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) 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
01	/	30	/	2017

Transaction ID : C7219003

Amount of Each Receipt this Period
100.00

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. **C**

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) 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
04	/	24	/	2017

Transaction ID : C7255414

Amount of Each Receipt this Period
100.00

Memo Item

C. 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. **C**

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) 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
04	/	24	/	2017

Transaction ID : C7255416

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 75 OF 218
	<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. 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. **C**

Name of Employer (for Individual) American Income Life Insurance	Occupation (for Individual) 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
04		24		2017

Transaction ID : C7255417

Amount of Each Receipt this Period
100.00

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. **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
01		30		2017

Transaction ID : C7218523

Amount of Each Receipt this Period
150.00

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. **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
01		30		2017

Transaction ID : C7218524

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 76 OF 218
	<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. **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
01	/	30	/	2017

Transaction ID : C7218525

Amount of Each Receipt this Period
150.00

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. **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
04	/	24	/	2017

Transaction ID : C7255004

Amount of Each Receipt this Period
150.00

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. **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
04	/	24	/	2017

Transaction ID : C7255005

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 77 OF 218
	<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. **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
04	/	24	/	2017

Transaction ID : C7255006

Amount of Each Receipt this Period
150.00

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2017

Transaction ID : C7217402

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2017

Transaction ID : C7217403

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 78 OF 218
	<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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217404
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7253949
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7253950
 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 79 OF 218
	<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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7253951
 Amount of Each Receipt this Period
 100.00
 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 ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7223451
 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 ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7223452
 Amount of Each Receipt this Period
 400.00
 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 80 OF 218
	<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 ▼ 2400.00

Date of Receipt
 01 / 30 / 2017
Transaction ID : C7223453
 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 ▼ 2400.00

Date of Receipt
 04 / 24 / 2017
Transaction ID : C7257880
 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 ▼ 2400.00

Date of Receipt
 04 / 24 / 2017
Transaction ID : C7257881
 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 81 OF 218
	<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 ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7257882
 Amount of Each Receipt this Period
 400.00
 Memo Item

B. 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7226509
 Amount of Each Receipt this Period
 150.00
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7253997
 Amount of Each Receipt this Period
 150.00
 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 82 OF 218
<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. Gschwend, Kelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 621 Sequoia St
 City Brentwood State CA Zip Code 94513
 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 ▼ 260.00

Date of Receipt **01 / 24 / 2017**
Transaction ID : C7213702
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Gschwend, Kelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 621 Sequoia St
 City Brentwood State CA Zip Code 94513
 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 ▼ 260.00

Date of Receipt **02 / 27 / 2017**
Transaction ID : C7231361
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Gschwend, Kelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 621 Sequoia St
 City Brentwood State CA Zip Code 94513
 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 ▼ 260.00

Date of Receipt **03 / 28 / 2017**
Transaction ID : C7248291
 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 83 OF 218
	<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. Gschwend, Kelly, , ,			Date of Receipt MM / DD / YYYY 04 / 24 / 2017 Transaction ID : C7263670		
Mailing Address 621 Sequoia St			Amount of Each Receipt this Period 50.00		
City Brentwood	State CA	Zip Code 94513	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) LOCAL 29		Occupation (for Individual) ORGANIZER			
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. Gschwend, Kelly, , ,			Date of Receipt MM / DD / YYYY 05 / 11 / 2017 Transaction ID : C7267128		
Mailing Address 621 Sequoia St			Amount of Each Receipt this Period 40.00		
City Brentwood	State CA	Zip Code 94513	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) LOCAL 29		Occupation (for Individual) ORGANIZER			
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. Gschwend, Kelly, , ,			Date of Receipt MM / DD / YYYY 06 / 19 / 2017 Transaction ID : C7273410		
Mailing Address 621 Sequoia St			Amount of Each Receipt this Period 40.00		
City Brentwood	State CA	Zip Code 94513	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) LOCAL 29		Occupation (for Individual) ORGANIZER			
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).....	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 84 OF 218
	<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 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7216887
 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 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7216888
 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 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7216889
 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 85 OF 218
<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. Hancock, Mark, , ,			Date of Receipt
Mailing Address 12546 Walnut Ridge Pl			<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Fishers	State IN	Zip Code 46038	Transaction ID : C7253389
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 LIFE INS. CO.		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"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hancock, Mark, , ,			Date of Receipt
Mailing Address 12546 Walnut Ridge Pl			<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Fishers	State IN	Zip Code 46038	Transaction ID : C7253390
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 LIFE INS. CO.		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"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hancock, Mark, , ,			Date of Receipt
Mailing Address 12546 Walnut Ridge Pl			<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Fishers	State IN	Zip Code 46038	Transaction ID : C7253391
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 LIFE INS. CO.		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="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 86 OF 218
<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. HART, MATHEW, R, ,		Date of Receipt
Mailing Address 8843 W RANCH RD		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City TRACY	State CA	Zip Code 95376
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7217945
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 ▼	Amount of Each Receipt this Period <input type="text" value="100.00"/>
<input type="checkbox"/> Memo Item		<input type="text" value="600.00"/>

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HART, MATHEW, R, ,		Date of Receipt
Mailing Address 8843 W RANCH RD		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City TRACY	State CA	Zip Code 95376
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7217946
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 ▼	Amount of Each Receipt this Period <input type="text" value="100.00"/>
<input type="checkbox"/> Memo Item		<input type="text" value="600.00"/>

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HART, MATHEW, R, ,		Date of Receipt
Mailing Address 8843 W RANCH RD		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City TRACY	State CA	Zip Code 95376
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7217947
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 ▼	Amount of Each Receipt this Period <input type="text" value="100.00"/>
<input type="checkbox"/> Memo Item		<input type="text" value="600.00"/>

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 87 OF 218
	<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 : C7254478

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 : C7254479

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 : C7254480

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 88 OF 218
	<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.

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 : C7220700

Amount of Each Receipt this Period

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.

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 : C7220701

Amount of Each Receipt this Period

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.

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 : C7220702

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="900.00"/>
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 89 OF 218
	<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. 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 ▼
 1800.00

Date of Receipt
 04 / 24 / 2017

Transaction ID : C7256541

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 ▼
 1800.00

Date of Receipt
 04 / 24 / 2017

Transaction ID : C7256542

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 ▼
 1800.00

Date of Receipt
 04 / 24 / 2017

Transaction ID : C7256543

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 90 OF 218
	<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 Ins.	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
01	/	30	/	2017

Transaction ID : C7225362

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 Ins.	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
01	/	30	/	2017

Transaction ID : C7225363

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 Life Ins.	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
01	/	30	/	2017

Transaction ID : C7225364

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 91 OF 218
	<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.

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 : C7261391

Amount of Each Receipt this Period

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.

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 : C7261392

Amount of Each Receipt this Period

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.

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 : C7261393

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 92 OF 218
	<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 ▼ 1500.00

Date of Receipt
 01 / 30 / 2017
Transaction ID : C7223454
 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 ▼ 1500.00

Date of Receipt
 01 / 30 / 2017
Transaction ID : C7223455
 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 ▼ 1500.00

Date of Receipt
 01 / 30 / 2017
Transaction ID : C7223456
 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 93 OF 218
<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. HAY, ROB, , ,			Date of Receipt MM / DD / YYYY 04 / 24 / 2017
Mailing Address PO BOX 208			Transaction ID : C7257883
City WACO	State TX	Zip Code 76703	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) 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 ▼ 1500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HAY, ROB, , ,			Date of Receipt MM / DD / YYYY 04 / 24 / 2017
Mailing Address PO BOX 208			Transaction ID : C7257884
City WACO	State TX	Zip Code 76703	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) 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 ▼ 1500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HAY, ROB, , ,			Date of Receipt MM / DD / YYYY 04 / 24 / 2017
Mailing Address PO BOX 208			Transaction ID : C7257885
City WACO	State TX	Zip Code 76703	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) 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 ▼ 1500.00	

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 94 OF 218
	<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. Headrick, Billie Faye, , ,			Date of Receipt
Mailing Address 3935 Hamill Rd			<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Hixson	State TN	Zip Code 37343-3516	Transaction ID : C7213744
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) OPEIU		Occupation (for Individual) 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="260.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Headrick, Billie Faye, , ,			Date of Receipt
Mailing Address 3935 Hamill Rd			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City Hixson	State TN	Zip Code 37343-3516	Transaction ID : C7231674
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) OPEIU		Occupation (for Individual) 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="260.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Headrick, Billie Faye, , ,			Date of Receipt
Mailing Address 3935 Hamill Rd			<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2017"/>
City Hixson	State TN	Zip Code 37343-3516	Transaction ID : C7267176
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) OPEIU		Occupation (for Individual) 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="260.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="180.00"/>
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 95 OF 218
	<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. 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 ▼ 260.00

Date of Receipt
 05 / 30 / 2017
Transaction ID : C7269189
 Amount of Each Receipt this Period 40.00
 Memo Item

B. 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 ▼ 260.00

Date of Receipt
 06 / 15 / 2017
Transaction ID : C7272680
 Amount of Each Receipt this Period 40.00
 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 ▼ 1500.00

Date of Receipt
 01 / 30 / 2017
Transaction ID : C7217314
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	330.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 218
<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. 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 ▼ 1500.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217315
 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 ▼ 1500.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217316
 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 ▼ 1500.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7253856
 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 97 OF 218
	<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 ▼ 1500.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7253857
 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 ▼ 1500.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7253860
 Amount of Each Receipt this Period 250.00
 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) American Income Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7218040
 Amount of Each Receipt this Period 100.00
 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 98 OF 218
	<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
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 : C7218041

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 : C7218042

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 : C7254558

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 99 OF 218
	<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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7254559

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7254560

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 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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7221068

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 100 OF 218
	<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. 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 ▼ 500.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7221069
 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 ▼ 500.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7221070
 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 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 ▼ 500.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7256774
 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 218
<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
JENNINGS, ALLAN, W, ,

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2017

Transaction ID : C7256775

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1945 THE EXCHANGE SE STE 110

City ATLANTA	State GA	Zip Code 30339
-----------------	-------------	-------------------

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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2017

Transaction ID : C7218812

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, KYLE, T, ,

Mailing Address 1945 THE EXCHANGE SE STE 110

City ATLANTA	State GA	Zip Code 30339
-----------------	-------------	-------------------

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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2017

Transaction ID : C7218813

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 102 OF 218
	<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. JOHNSON, KYLE, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1945 THE EXCHANGE SE STE 110
 City ATLANTA State GA Zip Code 30339
 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 ▼ 400.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7218814
 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 1945 THE EXCHANGE SE STE 110
 City ATLANTA State GA Zip Code 30339
 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 ▼ 400.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7255264
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Jones, Theatla, , ,
 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) Representative
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **01 / 24 / 2017**
Transaction ID : C7213691
 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 218
<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
Jones, Theatla, , ,

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) OPEIU, Local #4873	Occupation (for Individual) Representative
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7232776

Amount of Each Receipt this Period

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.

Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Representative
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7235913

Amount of Each Receipt this Period

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.

Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Representative
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7249182

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 218
<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
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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	04	/	2017

Transaction ID : C7267156

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2017

Transaction ID : C7269608

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 239 LIBERTY CIR

City COPPELL	State TX	Zip Code 75019
-----------------	-------------	-------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2017

Transaction ID : C7221052

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 105 OF 218
	<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 239 LIBERTY CIR
 City COPPELL State TX Zip Code 75019
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7221053
 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 239 LIBERTY CIR
 City COPPELL State TX Zip Code 75019
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7221054
 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 239 LIBERTY CIR
 City COPPELL State TX Zip Code 75019
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7256763
 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 106 OF 218
	<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 239 LIBERTY CIR
 City COPPELL State TX Zip Code 75019
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7256764
 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 239 LIBERTY CIR
 City COPPELL State TX Zip Code 75019
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7256765
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. JUDGE, CHRISTINE, I, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7400 PRAIRIE TWYNE DR
 City YUKON State OK Zip Code 73099
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7219369
 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 107 OF 218
	<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. JUDGE, CHRISTINE, I, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7400 PRAIRIE TWYNE DR
 City YUKON State OK Zip Code 73099
 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 ▼ 400.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7219370
 Amount of Each Receipt this Period 100.00
 Memo Item

B. JUDGE, CHRISTINE, I, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7400 PRAIRIE TWYNE DR
 City YUKON State OK Zip Code 73099
 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 ▼ 400.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7219371
 Amount of Each Receipt this Period 100.00
 Memo Item

C. JUDGE, CHRISTINE, I, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7400 PRAIRIE TWYNE DR
 City YUKON State OK Zip Code 73099
 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 ▼ 400.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7255668
 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 108 OF 218
	<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. Kalban, Sidney, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 24 / 2017
Mailing Address 2222 Bull St Suite 200		Transaction ID : C7213687
City Savannah	State GA	Zip Code 31401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Counsel	<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. Kalban, Sidney, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 02 / 27 / 2017
Mailing Address 2222 Bull St Suite 200		Transaction ID : C7232771
City Savannah	State GA	Zip Code 31401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Counsel	<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. Kalban, Sidney, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 08 / 2017
Mailing Address 2222 Bull St Suite 200		Transaction ID : C7235914
City Savannah	State GA	Zip Code 31401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) OPEIU, Local #4873	Occupation (for Individual) Counsel	<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).....▶	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 109 OF 218
	<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. 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 ▼ 300.00

Date of Receipt **04 / 07 / 2017**
Transaction ID : C7249183
 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 ▼ 300.00

Date of Receipt **05 / 04 / 2017**
Transaction ID : C7267157
 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 ▼ 300.00

Date of Receipt **06 / 05 / 2017**
Transaction ID : C7269609
 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 218
	<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 01 / 24 / 2017
Mailing Address 1137 Wlper St Apt 26			Transaction ID : C7213700
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 ▼ 265.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Keller, Terry, , ,			Date of Receipt MM / DD / YYYY 02 / 27 / 2017
Mailing Address 1137 Wlper St Apt 26			Transaction ID : C7231359
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 ▼ 265.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Keller, Terry, , ,			Date of Receipt MM / DD / YYYY 03 / 28 / 2017
Mailing Address 1137 Wlper St Apt 26			Transaction ID : C7248289
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 ▼ 265.00		

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: PAGE 111 OF 218
(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. 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 ▼ 265.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7263671
 Amount of Each Receipt this Period 50.00
 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 ▼ 265.00

Date of Receipt 05 / 08 / 2017
Transaction ID : C7267213
 Amount of Each Receipt this Period 5.00
 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 ▼ 265.00

Date of Receipt 05 / 11 / 2017
Transaction ID : C7267126
 Amount of Each Receipt this Period 40.00
 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 112 OF 218
	<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. 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 ▼ 265.00

Date of Receipt 06 / 19 / 2017
Transaction ID : C7273408
 Amount of Each Receipt this Period 40.00
 Memo Item

B. LAFOND, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 812 CABANA LN
 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) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 01 / 30 / 2017
Transaction ID : C7219853
 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 812 CABANA LN
 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) agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 01 / 30 / 2017
Transaction ID : C7219854
 Amount of Each Receipt this Period 41.67
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	123.34
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 218
	<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. LAFOND, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 812 CABANA LN

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) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.02

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		30		2017

Transaction ID : C7219855

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 812 CABANA LN

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) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.02

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		24		2017

Transaction ID : C7256009

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 812 CABANA LN

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) agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.02

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		24		2017

Transaction ID : C7256010

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 114 OF 218
	<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. LAFOND, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 812 CABANA LN
 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) agent
 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
 04 / 24 / 2017
Transaction ID : C7256011
 Amount of Each Receipt this Period
 41.67
 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 ▼ 625.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2017
Transaction ID : C7213721
 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 265 W. 14th St. 6th floor
 City New York State NY Zip Code 10011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2017
Transaction ID : C7214343
 Amount of Each Receipt this Period
 280.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	417.83
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 218
	<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 02 / 27 / 2017 Transaction ID : C7231681		
Mailing Address 11 Timber Lane			Amount of Each Receipt this Period 144.24		
City Northport	State NY	Zip Code 11768-2418	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
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 ▼ 625.04			

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 05 / 04 / 2017 Transaction ID : C7267184		
Mailing Address 11 Timber Lane			Amount of Each Receipt this Period 192.32		
City Northport	State NY	Zip Code 11768-2418	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
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 ▼ 625.04			

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 05 / 30 / 2017 Transaction ID : C7269177		
Mailing Address 11 Timber Lane			Amount of Each Receipt this Period 96.16		
City Northport	State NY	Zip Code 11768-2418	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
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 ▼ 625.04			

SUBTOTAL of Receipts This Page (optional).....	432.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 218
	<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 ▼ 625.04

Date of Receipt 06 / 15 / 2017
Transaction ID : C7272683
 Amount of Each Receipt this Period 96.16
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217550
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217551
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	296.16
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 117 OF 218
	<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. 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217552
 Amount of Each Receipt this Period 100.00
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7254097
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7254098
 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 118 OF 218
<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. LLOYD, SABRINA, N, ,		Date of Receipt
Mailing Address 9 LONGMEADOW DR		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City BARRINGTON HILLS	State IL	Zip Code 60010
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7254099
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 ▼ <input type="text" value="600.00"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LUSSIER, CHRIS, A, ,		Date of Receipt
Mailing Address 1240 SINGER DR		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City WEST PALM BEACH	State FL	Zip Code 33404
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7224527
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 ▼ <input type="text" value="700.00"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LUSSIER, CHRIS, A, ,		Date of Receipt
Mailing Address 1240 SINGER DR		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City WEST PALM BEACH	State FL	Zip Code 33404
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7224528
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 ▼ <input type="text" value="700.00"/>	Amount of Each Receipt this Period <input type="text" value="300.00"/>
<input type="checkbox"/> Memo Item		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="500.00"/>
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 119 OF 218
<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
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. **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 ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2017

Transaction ID : C7258622

Amount of Each Receipt this Period
100.00

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. **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 ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2017

Transaction ID : C7258623

Amount of Each Receipt this Period
100.00

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. **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 ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2017

Transaction ID : C7258624

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 120 OF 218
	<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												
Mailing Address 44 Pleasant 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>01</td> <td></td> <td>24</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	01		24		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
01		24		2017											
City Stoneham		State MA	Zip Code 02180-3828												
FEC ID number of contributing federal political committee. C			Transaction ID : C7213715												
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 ▼													
		38.46													
<input type="checkbox"/> Memo Item															

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mahoney, Mary, , ,			Date of Receipt												
Mailing Address 44 Pleasant 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>02</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	02		27		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
02		27		2017											
City Stoneham		State MA	Zip Code 02180-3828												
FEC ID number of contributing federal political committee. C			Transaction ID : C7231667												
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 ▼													
		57.69													
<input type="checkbox"/> Memo Item															

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mahoney, Mary, , ,			Date of Receipt												
Mailing Address 44 Pleasant 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>05</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	05		04		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
05		04		2017											
City Stoneham		State MA	Zip Code 02180-3828												
FEC ID number of contributing federal political committee. C			Transaction ID : C7267179												
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 ▼													
		76.92													
<input type="checkbox"/> Memo Item															

SUBTOTAL of Receipts This Page (optional).....	173.07
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 218
<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 05 / 30 / 2017
Mailing Address 44 Pleasant St			Transaction ID : C7269172
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 ▼ 249.99		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mahoney, Mary, , ,			Date of Receipt MM / DD / YYYY 06 / 15 / 2017
Mailing Address 44 Pleasant St			Transaction ID : C7272687
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 ▼ 249.99		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MANDELLA, MICHAEL, L, ,			Date of Receipt MM / DD / YYYY 01 / 30 / 2017
Mailing Address 5212 LANE PARKE COURT			Transaction ID : C7218841
City MOUNTAIN BROOKI	State AL	Zip Code 35224	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 ▼ 600.00		

SUBTOTAL of Receipts This Page (optional).....▶	176.92
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (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 218
	<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. MANDELLA, MICHAEL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5212 LANE PARKE COURT
 City MOUNTAIN BROOKI State AL Zip Code 35224
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7218842
 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 5212 LANE PARKE COURT
 City MOUNTAIN BROOKI State AL Zip Code 35224
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7218843
 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 5212 LANE PARKE COURT
 City MOUNTAIN BROOKI State AL Zip Code 35224
 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7255287
 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 123 OF 218
	<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. MANDELLA, MICHAEL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5212 LANE PARKE COURT
 City MOUNTAIN BROOKI State AL Zip Code 35224
 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 ▼ 600.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7255288
 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 5212 LANE PARKE COURT
 City MOUNTAIN BROOKI State AL Zip Code 35224
 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 ▼ 600.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7255289
 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 ▼ 600.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7217054
 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 124 OF 218
	<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. 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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7217055

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7217056

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7253590

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 125 OF 218
	<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. 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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7253591

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7253592

Amount of Each Receipt this Period
100.00

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7216863

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 126 OF 218
	<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. McCreary, John, , ,		Date of Receipt
Mailing Address 4537 Cove Dr Apt B		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City Carlsbad	State CA	Zip Code 92008
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7216864
Name of Employer (for Individual) American Income Life		Amount of Each Receipt this Period <input type="text" value="50.00"/>
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="300.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McCreary, John, , ,		Date of Receipt
Mailing Address 4537 Cove Dr Apt B		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City Carlsbad	State CA	Zip Code 92008
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7216865
Name of Employer (for Individual) American Income Life		Amount of Each Receipt this Period <input type="text" value="50.00"/>
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="300.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. McCreary, John, , ,		Date of Receipt
Mailing Address 4537 Cove Dr Apt B		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Carlsbad	State CA	Zip Code 92008
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7253368
Name of Employer (for Individual) American Income Life		Amount of Each Receipt this Period <input type="text" value="50.00"/>
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="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="150.00"/>
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 127 OF 218
	<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. 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7253369
 Amount of Each Receipt this Period
 50.00
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7253370
 Amount of Each Receipt this Period
 50.00
 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 ▼ 389.59

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2017
Transaction ID : C7207762
 Amount of Each Receipt this Period
 25.00
 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 128 OF 218
	<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 ▼ 389.59

Date of Receipt
 01 / 30 / 2017
Transaction ID : C7226925
 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 ▼ 389.59

Date of Receipt
 02 / 27 / 2017
Transaction ID : C7231668
 Amount of Each Receipt this Period 250.00
 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 ▼ 389.59

Date of Receipt
 02 / 27 / 2017
Transaction ID : C7232438
 Amount of Each Receipt this Period 9.59
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	279.59
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (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 218
	<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 ▼ 389.59

Date of Receipt **03 / 28 / 2017**
Transaction ID : C7247957
 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 ▼ 389.59

Date of Receipt **04 / 07 / 2017**
Transaction ID : C7249159
 Amount of Each Receipt this Period 25.00
 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 ▼ 389.59

Date of Receipt **05 / 08 / 2017**
Transaction ID : C7267222
 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 130 OF 218
	<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 389.59

Date of Receipt 06 / 16 / 2017
Transaction ID : C7273092
 Amount of Each Receipt this Period 20.00
 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 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217990
 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 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217991
 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 131 OF 218
<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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2017

Transaction ID : C7217992

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2017

Transaction ID : C7254517

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2017

Transaction ID : C7254518

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 218
	<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. MOODY, TRAVIS, P, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2017
Mailing Address 14417 SPRING DR			Transaction ID : C7254519
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 ▼ 600.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MORGAN, PATRICIA, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 30 / 2017
Mailing Address PO Box 208			Transaction ID : C7226510
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 ▼ 300.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MORGAN, PATRICIA, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2017
Mailing Address PO Box 208			Transaction ID : C7253998
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 ▼ 300.00		

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 133 OF 218
	<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 2728 PORT OF CALL DR

City LAS VEGAS	State NV	Zip Code 89128
-------------------	-------------	-------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7218022

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 2728 PORT OF CALL DR

City LAS VEGAS	State NV	Zip Code 89128
-------------------	-------------	-------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7218023

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 2728 PORT OF CALL DR

City LAS VEGAS	State NV	Zip Code 89128
-------------------	-------------	-------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7218024

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 134 OF 218
	<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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7261493

Amount of Each Receipt this Period
100.00

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7261494

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7261495

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 135 OF 218
(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 50 E 13TH ST #1604
 City KANSAS CITY State MO Zip Code 64106
 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 ▼ 500.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7220818
 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 50 E 13TH ST #1604
 City KANSAS CITY State MO Zip Code 64106
 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 ▼ 500.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7220819
 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 50 E 13TH ST #1604
 City KANSAS CITY State MO Zip Code 64106
 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 ▼ 500.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7220820
 Amount of Each Receipt this Period 100.00
 Memo Item

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 136 OF 218
	<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, DORIAN, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 E 13TH ST #1604
 City KANSAS CITY State MO Zip Code 64106
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7256626
 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 50 E 13TH ST #1604
 City KANSAS CITY State MO Zip Code 64106
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7256627
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7226243
 Amount of Each Receipt this Period
 1200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 218
	<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, THOMAS, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4121 SPRUCE PINE CT
 City RIVERSIDE State OH Zip Code 45424
 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 **04 / 24 / 2017**
Transaction ID : C7253992
 Amount of Each Receipt this Period 1200.00
 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 ▼ 2400.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7217483
 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)

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7217484
 Amount of Each Receipt this Period 400.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 218
	<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.

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 : C7217485

Amount of Each Receipt this Period

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.

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 : C7254033

Amount of Each Receipt this Period

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.

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 : C7254034

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="1200.00"/>
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 139 OF 218
	<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. 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 2400.00

Date of Receipt 04 / 24 / 2017
 Transaction ID : C7254035
 Amount of Each Receipt this Period 400.00
 Memo Item

B. Onasch, Laurie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 632 Moraine Ct
 City Colgate State WI Zip Code 53017
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 360.00

Date of Receipt 01 / 30 / 2017
 Transaction ID : C7226504
 Amount of Each Receipt this Period 180.00
 Memo Item

C. Onasch, Laurie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 632 Moraine Ct
 City Colgate State WI Zip Code 53017
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) American Income Life Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 360.00

Date of Receipt 04 / 24 / 2017
 Transaction ID : C7253513
 Amount of Each Receipt this Period 180.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	760.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 218
	<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. Page, Christine, , ,			Date of Receipt
Mailing Address 14152 Foothill Blvd #14			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City Sylmar	State CA	Zip Code 91342	Transaction ID : C7231679
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
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="250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PANZER, CHAD, T, ,			Date of Receipt
Mailing Address 810 DUTCH SQUARE BLVD STE 115			<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City COLUMBIA	State SC	Zip Code 29210	Transaction ID : C7225932
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 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="300.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PANZER, CHAD, T, ,			Date of Receipt
Mailing Address 810 DUTCH SQUARE BLVD STE 115			<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City COLUMBIA	State SC	Zip Code 29210	Transaction ID : C7225933
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 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="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="450.00"/>
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 141 OF 218
	<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. PANZER, CHAD, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 810 DUTCH SQUARE BLVD STE 115
 City COLUMBIA State SC Zip Code 29210
 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 04 / 24 / 2017
 Transaction ID : C7259659
 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 Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 01 / 30 / 2017
 Transaction ID : C7225929
 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 Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 01 / 30 / 2017
 Transaction ID : C7225930
 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 142 OF 218
	<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 Life Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7225931
 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) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7261758
 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) agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7261759
 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 143 OF 218
	<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, 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) 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
 04 / 24 / 2017
Transaction ID : C7261760
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7261607
 Amount of Each Receipt this Period 5.00
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7261608
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	205.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 218
	<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 ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7261609

Amount of Each Receipt this Period
100.00

Memo Item

B. 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 Ins.	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
01		30		2017

Transaction ID : C7224364

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 Ins.	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
01		30		2017

Transaction ID : C7224365

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 218
	<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. 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 Ins. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7224366
 Amount of Each Receipt this Period 100.00
 Memo Item

B. 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 Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7260509
 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 Occupation (for Individual) agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7260510
 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 146 OF 218
<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. 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 Occupation (for Individual) agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7260511
 Amount of Each Receipt this Period 100.00
 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 ▼ 330.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7217303
 Amount of Each Receipt this Period 80.00
 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 ▼ 330.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7217304
 Amount of Each Receipt this Period 80.00
 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 147 OF 218
<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 ▼ 330.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7217305
 Amount of Each Receipt this Period 80.00
 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 ▼ 330.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7253843
 Amount of Each Receipt this Period 80.00
 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 ▼ 330.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7253844
 Amount of Each Receipt this Period 5.00
 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 148 OF 218
	<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. 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 ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7253845
 Amount of Each Receipt this Period 50.00
 Memo Item

B. 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 ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2017
Transaction ID : C7213802
 Amount of Each Receipt this Period 50.00
 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 ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2017
Transaction ID : C7231485
 Amount of Each Receipt this Period 75.00
 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 149 OF 218
	<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 03 / 27 / 2017		
City Clio		State MI	Zip Code 48420		
FEC ID number of contributing federal political committee. C			Transaction ID : C7247623		
Name of Employer (for Individual) International Union UAW			Occupation (for Individual) Alternate Steward		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 50.00			

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 03 / 27 / 2017		
City Clio		State MI	Zip Code 48420		
FEC ID number of contributing federal political committee. C			Transaction ID : C7247752		
Name of Employer (for Individual) International Union UAW			Occupation (for Individual) Alternate Steward		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 25.00			

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 06 / 16 / 2017		
City Clio		State MI	Zip Code 48420		
FEC ID number of contributing federal political committee. C			Transaction ID : C7273111		
Name of Employer (for Individual) International Union UAW			Occupation (for Individual) Alternate Steward		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 75.00			

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 150 OF 218
	<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. 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 325.00

Date of Receipt 06 / 29 / 2017
Transaction ID : C7277192
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RISUCCI, RAYMOND, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11906 LONGMONT DR
 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) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 300.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7219288
 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 11906 LONGMONT DR
 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) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 300.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7219289
 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 151 OF 218
	<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 11906 LONGMONT DR
 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) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7219290
 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 ▼ 300.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7261262
 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 ▼ 300.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7261263
 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 152 OF 218
	<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 ▼ 300.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7261264
 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 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 ▼ 600.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7222048
 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 ▼ 600.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7222049
 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 153 OF 218
	<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 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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7222050

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 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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7257208

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7257209

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 154 OF 218
	<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. 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 ▼ 600.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7257210
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ROLAND, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2540 CORBEAU DR
 City IRVING State TX Zip Code 75038
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7226029
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ROLAND, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2540 CORBEAU DR
 City IRVING State TX Zip Code 75038
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7226030
 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 155 OF 218
	<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. ROLAND, ALEX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2540 CORBEAU DR

City IRVING	State TX	Zip Code 75038
----------------	-------------	-------------------

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 ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		30		2017

Transaction ID : C7226031

Amount of Each Receipt this Period
100.00

Memo Item

B. ROLAND, ALEX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2540 CORBEAU DR

City IRVING	State TX	Zip Code 75038
----------------	-------------	-------------------

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 ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		24		2017

Transaction ID : C7259728

Amount of Each Receipt this Period
100.00

Memo Item

C. ROLAND, ALEX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2540 CORBEAU DR

City IRVING	State TX	Zip Code 75038
----------------	-------------	-------------------

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 ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		24		2017

Transaction ID : C7259729

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 156 OF 218
	<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. ROLAND, ALEX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2540 CORBEAU DR

City IRVING	State TX	Zip Code 75038
----------------	-------------	-------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7259730

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7220620

Amount of Each Receipt this Period
100.00

Memo Item

C. 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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7220621

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 157 OF 218
	<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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7220622

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7256498

Amount of Each Receipt this Period
100.00

Memo Item

C. 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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7256499

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 158 OF 218
	<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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7256500
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2017
Transaction ID : C7213696
 Amount of Each Receipt this Period
 50.00
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2017
Transaction ID : C7231355
 Amount of Each Receipt this Period
 40.00
 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 159 OF 218
	<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 ▼ 360.00

Date of Receipt **02 / 27 / 2017**
Transaction ID : C7231670
 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 ▼ 360.00

Date of Receipt **03 / 28 / 2017**
Transaction ID : C7248285
 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 ▼ 360.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7263672
 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 160 OF 218
	<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 ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : C7267122

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 ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2017

Transaction ID : C7273404

Amount of Each Receipt this Period
40.00

Memo Item

C. Sanchez, Pat, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 344 Rock Creek Way

City Pleasant Hill	State CA	Zip Code 94523
-----------------------	-------------	-------------------

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 ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	24	/	2017

Transaction ID : C7213698

Amount of Each Receipt this Period
50.00

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 161 OF 218
<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 02 / 27 / 2017 Transaction ID : C7231357
Mailing Address 344 Rock Creek Way		Amount of Each Receipt this Period 40.00
City Pleasant Hill	State CA	Zip Code 94523
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 ▼ 260.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sanchez, Pat, , ,		Date of Receipt MM / DD / YYYY 03 / 28 / 2017 Transaction ID : C7248287
Mailing Address 344 Rock Creek Way		Amount of Each Receipt this Period 40.00
City Pleasant Hill	State CA	Zip Code 94523
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 ▼ 260.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Sanchez, Pat, , ,		Date of Receipt MM / DD / YYYY 04 / 24 / 2017 Transaction ID : C7263675
Mailing Address 344 Rock Creek Way		Amount of Each Receipt this Period 50.00
City Pleasant Hill	State CA	Zip Code 94523
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 ▼ 260.00	

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 162 OF 218
	<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 344 Rock Creek Way
 City Pleasant Hill State CA Zip Code 94523
 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 ▼ 260.00

Date of Receipt 05 / 11 / 2017
Transaction ID : C7267124
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Sanchez, Pat, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 344 Rock Creek Way
 City Pleasant Hill State CA Zip Code 94523
 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 ▼ 260.00

Date of Receipt 06 / 19 / 2017
Transaction ID : C7273406
 Amount of Each Receipt this Period 40.00
 Memo Item

C. 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 ▼ 250.00

Date of Receipt 02 / 27 / 2017
Transaction ID : C7231677
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (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 218
	<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. Schu, Cynthia, , ,		Date of Receipt
Mailing Address 5041 SW Prince St		<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Seattle	State WA	Zip Code 98116
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7213746
Name of Employer (for Individual) Information Requested		Amount of Each Receipt this Period
Occupation (for Individual) Information Requested		<input type="text" value="40.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item
	<input type="text" value="260.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Schu, Cynthia, , ,		Date of Receipt
Mailing Address 5041 SW Prince St		<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City Seattle	State WA	Zip Code 98116
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7231695
Name of Employer (for Individual) Information Requested		Amount of Each Receipt this Period
Occupation (for Individual) Information Requested		<input type="text" value="60.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item
	<input type="text" value="260.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Schu, Cynthia, , ,		Date of Receipt
Mailing Address 5041 SW Prince St		<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2017"/>
City Seattle	State WA	Zip Code 98116
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7267196
Name of Employer (for Individual) Information Requested		Amount of Each Receipt this Period
Occupation (for Individual) Information Requested		<input type="text" value="80.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item
	<input type="text" value="260.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="180.00"/>
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 164 OF 218
	<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. 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : C7269198
 Amount of Each Receipt this Period
 40.00
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2017
Transaction ID : C7272700
 Amount of Each Receipt this Period
 40.00
 Memo Item

C. Schwarzwald, Melvin, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2950 Warrensville Center Rd
 City Shaker Heights State OH Zip Code 44122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Schwarzwald & McNair Counsel
 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
 01 / 24 / 2017
Transaction ID : C7213597
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	330.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 218
	<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. Serrano, Joe, , ,		Date of Receipt MM / DD / YYYY 01 / 24 / 2017
Mailing Address 6070 Gateway E Suite 5006		Transaction ID : C7213685
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 ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Serrano, Joe, , ,		Date of Receipt MM / DD / YYYY 02 / 27 / 2017
Mailing Address 6070 Gateway E Suite 5006		Transaction ID : C7232778
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 ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Serrano, Joe, , ,		Date of Receipt MM / DD / YYYY 03 / 08 / 2017
Mailing Address 6070 Gateway E Suite 5006		Transaction ID : C7235918
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 ▼ 300.00	

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 166 OF 218
	<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
Mailing Address 6070 Gateway E Suite 5006			<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2017"/>
City El Paso	State TX	Zip Code 79905	Transaction ID : C7249187
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) 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 ▼ <input type="text" value="300.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Serrano, Joe, , ,			Date of Receipt
Mailing Address 6070 Gateway E Suite 5006			<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2017"/>
City El Paso	State TX	Zip Code 79905	Transaction ID : C7267161
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) 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 ▼ <input type="text" value="300.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Serrano, Joe, , ,			Date of Receipt
Mailing Address 6070 Gateway E Suite 5006			<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2017"/>
City El Paso	State TX	Zip Code 79905	Transaction ID : C7269613
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) 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 ▼ <input type="text" value="300.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
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 167 OF 218
	<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. SERUR, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 PATRIOT WAY N
 City 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) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 01 / 30 / 2017
 Transaction ID : C7222310
 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 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) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 01 / 30 / 2017
 Transaction ID : C7222311
 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 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) Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 01 / 30 / 2017
 Transaction ID : C7222312
 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 168 OF 218
	<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. SERUR, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 PATRIOT WAY N
 City 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) 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
 04 / 24 / 2017
Transaction ID : C7261052
 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 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) 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
 04 / 24 / 2017
Transaction ID : C7261053
 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 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) 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
 04 / 24 / 2017
Transaction ID : C7261054
 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 169 OF 218
	<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, Beth, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4313 Whitehoof Way
 City Antioch State CA Zip Code 94531
 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 ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7217306
 Amount of Each Receipt this Period 80.00
 Memo Item

B. Snow, Beth, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4313 Whitehoof Way
 City Antioch State CA Zip Code 94531
 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 ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7217307
 Amount of Each Receipt this Period 80.00
 Memo Item

C. Snow, Beth, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4313 Whitehoof Way
 City Antioch State CA Zip Code 94531
 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 ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7253846
 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 170 OF 218
<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, Beth, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4313 Whitehoof Way
 City Antioch State CA Zip Code 94531
 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 ▼ 480.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7253847
 Amount of Each Receipt this Period 160.00
 Memo Item

B. Snow, Beth, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4313 Whitehoof Way
 City Antioch State CA Zip Code 94531
 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 ▼ 480.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7253851
 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 ▼ 480.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217933
 Amount of Each Receipt this Period 80.00
 Memo Item

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: PAGE 171 OF 218
(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. 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 ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7217934
 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 ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7217935
 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 ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7254468
 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 172 OF 218
<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, CURT, D, ,		Date of Receipt
Mailing Address 1920 KENT DR		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City BRENTWOOD	State CA	Zip Code 94513
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7254469
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 ▼ <input type="text" value="480.00"/>	Amount of Each Receipt this Period <input type="text" value="80.00"/>
		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SNOW, CURT, D, ,		Date of Receipt
Mailing Address 1920 KENT DR		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City BRENTWOOD	State CA	Zip Code 94513
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7254470
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 ▼ <input type="text" value="480.00"/>	Amount of Each Receipt this Period <input type="text" value="80.00"/>
		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SONNENBERG, SCOTT, E, ,		Date of Receipt
Mailing Address 351 CHANNELSIDE WALKWAY #4307		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City TAMPA	State FL	Zip Code 33602
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C7220463
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 ▼ <input type="text" value="600.00"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
		<input type="checkbox"/> Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="260.00"/>
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 173 OF 218
	<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. SONNENBERG, SCOTT, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 351 CHANNELSIDE WALKWAY #4307

City TAMPA	State FL	Zip Code 33602
---------------	-------------	-------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7220464

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 351 CHANNELSIDE WALKWAY #4307

City TAMPA	State FL	Zip Code 33602
---------------	-------------	-------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7220465

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 351 CHANNELSIDE WALKWAY #4307

City TAMPA	State FL	Zip Code 33602
---------------	-------------	-------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7256402

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 174 OF 218
	<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. SONNENBERG, SCOTT, E, ,			Date of Receipt								
Mailing Address 351 CHANNELSIDE WALKWAY #4307			<table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">M M M</td> <td style="width: 33%;">D D D</td> <td style="width: 33%;">Y Y Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">04</td> <td style="text-align: center;">24</td> <td style="text-align: center;">2017</td> </tr> </table>			M M M	D D D	Y Y Y Y Y Y	04	24	2017
M M M	D D D	Y Y Y Y Y Y									
04	24	2017									
City TAMPA		State FL	Zip Code 33602								
FEC ID number of contributing federal political committee. C			Transaction ID : C7256403								
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 ▼									
		600.00									
			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. SONNENBERG, SCOTT, E, ,			Date of Receipt								
Mailing Address 351 CHANNELSIDE WALKWAY #4307			<table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">M M M</td> <td style="width: 33%;">D D D</td> <td style="width: 33%;">Y Y Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">04</td> <td style="text-align: center;">24</td> <td style="text-align: center;">2017</td> </tr> </table>			M M M	D D D	Y Y Y Y Y Y	04	24	2017
M M M	D D D	Y Y Y Y Y Y									
04	24	2017									
City TAMPA		State FL	Zip Code 33602								
FEC ID number of contributing federal political committee. C			Transaction ID : C7256404								
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 ▼									
		600.00									
			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 C. SPARBY, JOHN, C, ,			Date of Receipt								
Mailing Address 6024 158TH ST W			<table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">M M M</td> <td style="width: 33%;">D D D</td> <td style="width: 33%;">Y Y Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">01</td> <td style="text-align: center;">30</td> <td style="text-align: center;">2017</td> </tr> </table>			M M M	D D D	Y Y Y Y Y Y	01	30	2017
M M M	D D D	Y Y Y Y Y Y									
01	30	2017									
City SAINT PAUL		State MN	Zip Code 55124								
FEC ID number of contributing federal political committee. C			Transaction ID : C7219763								
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 ▼									
		240.00									
			Amount of Each Receipt this Period								
			40.00								
			<input type="checkbox"/> 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: PAGE 175 OF 218
(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. 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 ▼ 240.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7219764
 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 ▼ 240.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7219765
 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 ▼ 240.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7255938
 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 176 OF 218
(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. 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 ▼ 240.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7255939
 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 ▼ 240.00

Date of Receipt 04 / 24 / 2017
Transaction ID : C7255940
 Amount of Each Receipt this Period 40.00
 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 ▼ 2496.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7217369
 Amount of Each Receipt this Period 416.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	496.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (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 218
	<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 ▼
2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7217370

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 ▼
2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7217371

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 ▼
2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7253913

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 178 OF 218
	<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 ▼
2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7253914

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 ▼
2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : C7253915

Amount of Each Receipt this Period
416.00

Memo Item

C. 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 ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2017

Transaction ID : C7231690

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1032.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 218
<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.

Name of Employer (for Individual) Local 459	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : C7249151

Amount of Each Receipt this Period

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.

Name of Employer (for Individual) Local 459	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : C7267791

Amount of Each Receipt this Period

Memo Item

C. 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.

Name of Employer (for Individual) Local 459	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : C7275490

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="110.00"/>
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 180 OF 218
	<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. 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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7217093

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7217094

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Transaction ID : C7217095

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 218
	<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. Thiel, Jeffery, P, ,			Date of Receipt
Mailing Address 995 Sara Ct			<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Pataskala	State OH	Zip Code 43062	Transaction ID : C7253638
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 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"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Thiel, Jeffery, P, ,			Date of Receipt
Mailing Address 995 Sara Ct			<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Pataskala	State OH	Zip Code 43062	Transaction ID : C7253639
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 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"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Thiel, Jeffery, P, ,			Date of Receipt
Mailing Address 995 Sara Ct			<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Pataskala	State OH	Zip Code 43062	Transaction ID : C7253640
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 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="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 182 OF 218
	<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
THIEME, KRISTA, M, ,

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 Life Ins.	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
01		30		2017

Transaction ID : C7225311

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THIEME, KRISTA, M, ,

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 Life Ins.	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
01		30		2017

Transaction ID : C7225312

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THIEME, KRISTA, M, ,

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 Life Ins.	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
01		30		2017

Transaction ID : C7225313

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 183 OF 218
	<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. THIEME, KRISTA, M, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2017		
Mailing Address 613 HOLT AVE			Transaction ID : C7261380		
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) agent	Aggregate Year-to-Date ▼ 300.00		
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 04 / 24 / 2017		
Mailing Address 613 HOLT AVE			Transaction ID : C7261381		
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) agent	Aggregate Year-to-Date ▼ 300.00		
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, KRISTA, M, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2017		
Mailing Address 613 HOLT AVE			Transaction ID : C7261382		
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) agent	Aggregate Year-to-Date ▼ 300.00		
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: PAGE 184 OF 218
(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. Turner, Becky, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) LOCAL 277 Occupation (for Individual) President/Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 27 / 2017
Transaction ID : C7231699
 Amount of Each Receipt this Period 250.00
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7218074
 Amount of Each Receipt this Period 100.00
 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 ▼ 600.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7218075
 Amount of Each Receipt this Period 100.00
 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 185 OF 218
	<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 ▼ 600.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7218076
 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 ▼ 600.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7254593
 Amount of Each Receipt this Period 100.00
 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 ▼ 600.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7254594
 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 186 OF 218
	<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 ▼ 600.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : C7254595
 Amount of Each Receipt this Period 100.00
 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 ▼ 3000.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7219973
 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 ▼ 3000.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7219974
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (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 218
	<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 ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2017

Transaction ID : C7219975

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 ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2017

Transaction ID : C7256099

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 ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2017

Transaction ID : C7256100

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 188 OF 218
	<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 ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7256101
 Amount of Each Receipt this Period 500.00
 Memo Item

B. 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. **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
 01 / 30 / 2017
Transaction ID : C7219474
 Amount of Each Receipt this Period 100.00
 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. **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
 01 / 30 / 2017
Transaction ID : C7219475
 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 189 OF 218
	<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
VENEKAMP, DUSTIN, WX, ,

Mailing Address 6707 ALMERIA RD

City SCOTTSDALE	State AZ	Zip Code 85257
--------------------	-------------	-------------------

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	/	D D	/	Y Y Y Y
01		30		2017

Transaction ID : C7219479

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VENEKAMP, DUSTIN, WX, ,

Mailing Address 6707 ALMERIA RD

City SCOTTSDALE	State AZ	Zip Code 85257
--------------------	-------------	-------------------

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	/	D D	/	Y Y Y Y
04		24		2017

Transaction ID : C7255736

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VENEKAMP, DUSTIN, WX, ,

Mailing Address 6707 ALMERIA RD

City SCOTTSDALE	State AZ	Zip Code 85257
--------------------	-------------	-------------------

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	/	D D	/	Y Y Y Y
04		24		2017

Transaction ID : C7255737

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 190 OF 218
	<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. 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. 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 04 / 24 / 2017
Transaction ID : C7255738
 Amount of Each Receipt this Period 100.00
 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 ▼ 260.00

Date of Receipt 01 / 24 / 2017
Transaction ID : C7213704
 Amount of Each Receipt this Period 50.00
 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 ▼ 260.00

Date of Receipt 02 / 27 / 2017
Transaction ID : C7231363
 Amount of Each Receipt this Period 40.00
 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 191 OF 218
	<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. 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2017
Transaction ID : C7248293
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7263673
 Amount of Each Receipt this Period
 50.00
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : C7267130
 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 192 OF 218
	<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. 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 ▼ 260.00

Date of Receipt **06 / 19 / 2017**
Transaction ID : C7273412
 Amount of Each Receipt this Period 40.00
 Memo Item

B. WEATHERSPOON, JAMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8040 CAVENDISH PL
 City SUWANEE State GA Zip Code 30024
 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 ▼ 420.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7218559
 Amount of Each Receipt this Period 20.00
 Memo Item

C. WEATHERSPOON, JAMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8040 CAVENDISH PL
 City SUWANEE State GA Zip Code 30024
 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 ▼ 420.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : C7218560
 Amount of Each Receipt this Period 100.00
 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 193 OF 218
	<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. WEATHERSPOON, JAMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8040 CAVENDISH PL
 City SUWANEE State GA Zip Code 30024
 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 420.00

Date of Receipt 01 / 30 / 2017
 Transaction ID : C7218561
 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 8040 CAVENDISH PL
 City SUWANEE State GA Zip Code 30024
 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 420.00

Date of Receipt 04 / 24 / 2017
 Transaction ID : C7255040
 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 8040 CAVENDISH PL
 City SUWANEE State GA Zip Code 30024
 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 420.00

Date of Receipt 04 / 24 / 2017
 Transaction ID : C7255041
 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 194 OF 218
	<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 128 W Olive Ave
 City Monrovia State CA Zip Code 91016-3410
 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 ▼ 270.00

Date of Receipt 01 / 03 / 2017
Transaction ID : C7207756
 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 128 W Olive Ave
 City Monrovia State CA Zip Code 91016-3410
 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 ▼ 270.00

Date of Receipt 01 / 31 / 2017
Transaction ID : C7226929
 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 128 W Olive Ave
 City Monrovia State CA Zip Code 91016-3410
 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 ▼ 270.00

Date of Receipt 03 / 08 / 2017
Transaction ID : C7235897
 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 195 OF 218
	<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 128 W Olive Ave
 City Monrovia State CA Zip Code 91016-3410
 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 ▼ 270.00

Date of Receipt **04 / 07 / 2017**
Transaction ID : C7249116
 Amount of Each Receipt this Period 60.00
 Memo Item

B. White-Brown, Jacqueline, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 W Olive Ave
 City Monrovia State CA Zip Code 91016-3410
 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 ▼ 270.00

Date of Receipt **05 / 04 / 2017**
Transaction ID : C7267138
 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 128 W Olive Ave
 City Monrovia State CA Zip Code 91016-3410
 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 ▼ 270.00

Date of Receipt **06 / 16 / 2017**
Transaction ID : C7273077
 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: PAGE 196 OF 218
(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. WILBOURN, NAKIA, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8050 TAYLOR RD #2508
 City RIVERDALE State GA Zip Code 30274
 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 ▼ 508.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7224608
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WILBOURN, NAKIA, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8050 TAYLOR RD #2508
 City RIVERDALE State GA Zip Code 30274
 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 ▼ 508.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7224609
 Amount of Each Receipt this Period 8.00
 Memo Item

C. WILBOURN, NAKIA, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8050 TAYLOR RD #2508
 City RIVERDALE State GA Zip Code 30274
 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 ▼ 508.00

Date of Receipt 01 / 30 / 2017
Transaction ID : C7224610
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 208.00
TOTAL This Period (last page this line 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 197 OF 218
(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)

A. WILBOURN, NAKIA, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8050 TAYLOR RD #2508
 City RIVERDALE State GA Zip Code 30274
 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 ▼ 508.00

Date of Receipt
 04 / 24 / 2017
Transaction ID : C7258698
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. WILBOURN, NAKIA, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8050 TAYLOR RD #2508
 City RIVERDALE State GA Zip Code 30274
 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 ▼ 508.00

Date of Receipt
 04 / 24 / 2017
Transaction ID : C7258699
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. WILBOURN, NAKIA, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8050 TAYLOR RD #2508
 City RIVERDALE State GA Zip Code 30274
 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 ▼ 508.00

Date of Receipt
 04 / 24 / 2017
Transaction ID : C7258700
 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 198 OF 218
	<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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7217372
 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 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7217373
 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7217374
 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 199 OF 218
	<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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7253916
 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 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7253917
 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7253918
 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 200 OF 218
	<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 74133
 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
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7225607
 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 74133
 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
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : C7225608
 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 74133
 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
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7259444
 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 201 OF 218
	<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 ▼ 300.00

Date of Receipt **01 / 24 / 2017**
Transaction ID : C7213692
 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 ▼ 300.00

Date of Receipt **02 / 27 / 2017**
Transaction ID : C7232770
 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 ▼ 300.00

Date of Receipt **03 / 08 / 2017**
Transaction ID : C7235919
 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 202 OF 218
	<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 ▼ 300.00

Date of Receipt **04 / 07 / 2017**
Transaction ID : C7249188
 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 ▼ 300.00

Date of Receipt **05 / 04 / 2017**
Transaction ID : C7267162
 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 ▼ 300.00

Date of Receipt **06 / 05 / 2017**
Transaction ID : C7269614
 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 203 OF 218
	<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
ZOPHIN, DAVID, S, ,

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 ▼
1200.00

Date of Receipt
01 / 30 / 2017

Transaction ID : **C7223442**

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZOPHIN, DAVID, S, ,

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 ▼
1200.00

Date of Receipt
01 / 30 / 2017

Transaction ID : **C7223443**

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZOPHIN, DAVID, S, ,

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 ▼
1200.00

Date of Receipt
01 / 30 / 2017

Transaction ID : **C7223444**

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 204 OF 218
	<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. 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7257871
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7257872
 Amount of Each Receipt this Period
 200.00
 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : C7257873
 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).....	71111.78

**SCHEDULE A (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 218
<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.

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7230522

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 : C7246610

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 : C7253263

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="95.28"/>
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 206 OF 218
<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 ▼
201.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : C7269040

Amount of Each Receipt this Period
33.42

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 ▼
201.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : C7269596

Amount of Each Receipt this Period
37.05

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 ▼
201.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : C7276985

Amount of Each Receipt this Period
7.48

Memo Item

SUBTOTAL of Receipts This Page (optional).....	77.95
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 218
	<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.

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : C7277894

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 : C7277895

Amount of Each Receipt this Period

Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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
 / /

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="28.51"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="201.74"/>

**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)

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

Full Name (Last, First, Middle Initial)

A. Calibre CPA Group PLLC

Mailing Address 7501 Wisconsin Avenue, Suite 1200

City Bethesda State MD Zip Code 20814

Purpose of Disbursement Administrative/Accounting Fees

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : D371516

Amount of Each Disbursement this Period

3000.00

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 PAC Software

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : D371322

Amount of Each Disbursement this Period

1125.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NGP Software

Mailing Address 1101 15th St, NW Suite 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement PAC Software

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : D372234

Amount of Each Disbursement this Period

1125.00

Memo Item

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

5250.00

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

5250.00

**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. DENHAM FOR CONGRESS

Mailing Address 2150 RIVER PLAZA DR., #150

City SACRAMENTO State CA Zip Code 95833

Purpose of Disbursement Congress (CA-10)

Category/
Type

Candidate Name DENHAM, JEFF, , ,

Office Sought: House Senate President
State: CA District: 10

Disbursement For: 2017
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D371519

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. KYRSTEN SINEMA FOR CONGRESS

Mailing Address PO BOX 25879

City TEMPE State AZ Zip Code 85285

Purpose of Disbursement Congress, AZ-09

Category/
Type

Candidate Name SINEMA, KYRSTEN, , ,

Office Sought: House Senate President
State: AZ District: 09

Disbursement For: 2017
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D367232

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)

A. Arkoosh, Valerie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1177

City Norristown State PA Zip Code 19404

Purpose of Disbursement Montgomery County Commissioner (PA)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 08 / 2017

FEC Identification Number: C

Transaction ID : D372098

Amount of Each Disbursement this Period: 500.00

Memo Item

B. Brooks-Jimenez, Michael, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5708 S Western Avenue

City Oklahoma City State OK Zip Code 73109

Purpose of Disbursement State Senate (OK-44)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 07 / 2017

FEC Identification Number: C

Transaction ID : D372209

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. CITIBANK, F.S.B.

Full Name (Last, First, Middle Initial)

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: 06 / 30 / 2017

FEC Identification Number: C

Transaction ID : D372649

Amount of Each Disbursement this Period: 38.70

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1538.70

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

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	7

FEC Identification Number

C []

Transaction ID : D372795

Amount of Each Disbursement this Period

[] - 38.70

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
0	6		0	1		2	0	1	7

FEC Identification Number

C []

Transaction ID : D372796

Amount of Each Disbursement this Period

[] 37.45

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
0	4		3	0		2	0	1	7

FEC Identification Number

C []

Transaction ID : D372182

Amount of Each Disbursement this Period

[] 41.20

Memo Item

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

[] 39.95

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. 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

MM / DD / YYYY
05 / 31 / 2017

FEC Identification Number

C []

Transaction ID : D372206

Amount of Each Disbursement this Period

[] 38.70

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

MM / DD / YYYY
01 / 31 / 2017

FEC Identification Number

C []

Transaction ID : D370297

Amount of Each Disbursement this Period

[] 39.95

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

MM / DD / YYYY
02 / 28 / 2017

FEC Identification Number

C []

Transaction ID : D371246

Amount of Each Disbursement this Period

[] 41.20

Memo Item

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

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

[] 119.85

[]

**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

MM / DD / YYYY
03 / 31 / 2017

FEC Identification Number

C

Transaction ID : D371518

Amount of Each Disbursement this Period

41.20

Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens for Mike Treybich

Mailing Address 14 Deer Run Road

City Poughkeepsie State NY Zip Code 12603

Purpose of Disbursement Supervisor for Town of Poughkeepsie, NY

Candidate Name

Treybich, Mike, , ,

Office Sought: House Senate President
State: NY District:

Disbursement For: 2017 Primary General Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2017

FEC Identification Number

C

Transaction ID : D372093

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Dr. V. Campaign Fund

Mailing Address 8844 Miramar Pkwy

City Hollywood State FL Zip Code 33025

Purpose of Disbursement City Commission Seat #2, FL

Candidate Name

Walker, Venessa, , ,

Office Sought: House Senate President
State: FL District: 02

Disbursement For: 2017 Primary General Other (specify) ▼
Special

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2017

FEC Identification Number

C

Transaction ID : D371524

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)..... ▶

2041.20

**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. Eagen, Todd, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 626

City Scranton State PA Zip Code 18501

Purpose of Disbursement PA Commonwealth Court Judge

Candidate Name

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: District:

Date of Disbursement 05 / 08 / 2017

FEC Identification Number C

Transaction ID : D372103

Amount of Each Disbursement this Period 500.00

Memo Item

B. Friends of Cheryl Poole for School Board

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 21231

City Oklahoma City State OK Zip Code 73159

Purpose of Disbursement District 1, OKC Public School of Ed

Candidate Name

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: District: Runoff

Date of Disbursement 03 / 17 / 2017

FEC Identification Number C

Transaction ID : D371244

Amount of Each Disbursement this Period 500.00

Memo Item

C. Jeanette Slesnick Campaign

Full Name (Last, First, Middle Initial)

Mailing Address 827 N. Greenway Drive

City Coral Gables State FL Zip Code 33134

Purpose of Disbursement Mayor of Coral Gables, FL

Candidate Name Slesnick, Jeanette, , ,

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: FL District:

Date of Disbursement 03 / 17 / 2017

FEC Identification Number C

Transaction ID : D371239

Amount of Each Disbursement this Period 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2000.00

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 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. Kane, Mike, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4406 N 112th Street

City Kansas City State KS Zip Code 66101

Purpose of Disbursement Unified Government Wyandotte County Commissioner, (KS-05)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 05 / 2017

FEC Identification Number: C

Transaction ID : D372095

Amount of Each Disbursement this Period: 500.00

Memo Item

B. Kionne McGhee Campaign

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 700388

City Miami State FL Zip Code 33170

Purpose of Disbursement State Representative (FL-117)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 12 / 2017

FEC Identification Number: C

Transaction ID : D372119

Amount of Each Disbursement this Period: - 500.00

Memo Item

C. Murphy for Governor

Full Name (Last, First, Middle Initial)

Mailing Address One Gateway Center, Suite 511

City Newark State NJ Zip Code 07102

Purpose of Disbursement Governor, NJ

Candidate Name **Murphy, Phil, , ,**

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: NJ District:

Date of Disbursement: 06 / 09 / 2017

FEC Identification Number: C

Transaction ID : D372235

Amount of Each Disbursement this Period: 4300.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4300.00

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 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. Norman Hemmings Campaign

Mailing Address 9450 SW 18th St

City
Miramar

State
FL

Zip Code
33025-4723

Purpose of Disbursement
Commission Seat #1, FL

011

Category/
Type

Candidate Name

Hemmings, Norman, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2017

Primary General
 Other (specify) ▼
Special

State: FL

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 07 / 2017

FEC Identification Number

C

Transaction ID : D371525

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Richard Morrissette for OKC Council

Mailing Address 7204 S Pennsylvania Avenue

City
Oklahoma City

State
OK

Zip Code
73159

Purpose of Disbursement
Ward 4, OKC Council

011

Category/
Type

Candidate Name

Morrissette, Richard, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2017

Primary General
 Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 17 / 2017

FEC Identification Number

C

Transaction ID : D371241

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Rodriguez for City Council 2016

Mailing Address PO Box 1484

City
National City

State
CA

Zip Code
91951-1484

Purpose of Disbursement
City Council for National City (CA)

011

Category/
Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 22 / 2017

FEC Identification Number

C

Transaction ID : D372137

Amount of Each Disbursement this Period

- 100.00

Memo Item

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

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

1400.00

**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. Rothstein, Wendy, , ,

Mailing Address PO Box 3001

City
Blue Bell

State
PA

Zip Code
19422

Purpose of Disbursement
Montgomery County Court of Common Pleas Judge

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 08 / 2017

FEC Identification Number

C

Transaction ID : D372101

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Schneiderman 2014

Mailing Address 120 Broadway
28th Floor

City
New York

State
NY

Zip Code
10271

Purpose of Disbursement
Attorney General NY

011

Category/
Type

Candidate Name

Schneiderman, Eric, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify)

State: NY District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 11 / 2017

FEC Identification Number

C

Transaction ID : D371479

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Kennedy For Senate

Mailing Address PO Box 73

City
Buffalo

State
NY

Zip Code
14220

Purpose of Disbursement
Senate, NY

011

Category/
Type

Candidate Name

Kennedy, Tim, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: NY District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

FEC Identification Number

C

Transaction ID : D372146

Amount of Each Disbursement this Period

500.00

Memo Item

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

2500.00

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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
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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. Winston Barnes

Mailing Address 2721 Laguana Way

City
Hollywood

State
FL

Zip Code
33025

Purpose of Disbursement
City of Miramar Commission, Seat #3

011

Category/
Type

Candidate Name

Barnes, Winston, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) ▼
Special

State: FL District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 07 / 2017

FEC Identification Number

C

Transaction ID : D371521

Amount of Each Disbursement this Period

1000.00

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

Disbursement For:
 Primary General
 Other (specify)

State: District:

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

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

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

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

1000.00

14939.70