

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Bob Casey

Mailing Address 30 SOUTH 15TH STREET SUITE 400

City PHILADELPHIA State PA Zip Code 19102

Purpose of Disbursement
Senate, PA, General

011

Candidate Name
ROBERT P JR CASEY

Category/
Type

Office Sought: House
 Senate
 President
State: PA District: 00

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	24	/	2012

Transaction ID : D290703

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. CARMONA FOR ARIZONA

Mailing Address PO BOX 12339

City TUCSON State AZ Zip Code 85732

Purpose of Disbursement
Senate, AZ, General

011

Candidate Name
RICHARD CARMONA

Category/
Type

Office Sought: House
 Senate
 President
State: AZ District: 00

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	24	/	2012

Transaction ID : D290694

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Chris Murphy

Mailing Address P.O. BOX 127

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement
Senate, CT, General

011

Candidate Name
CHRISTOPHER SCOTT M MURPHY

Category/
Type

Office Sought: House
 Senate
 President
State: CT District: 05

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	24	/	2012

Transaction ID : D290696

Amount of Each Disbursement this Period

2500.00

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

7500.00

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

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