

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Office and Professional Employees International Union - Voice of the Electorate

ADDRESS (number and street) 1660 L STREET, NW SUITE 801 Washington DC 20036 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00007898 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special Election on 01 21 2008 in the State of OH

5. Covering Period 01 01 2008 through 02 13 2008

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

Signature of Treasurer Electronically Filed by Nancy Wohlforth Date 05 27 2008

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

Office Use Only FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Office and Professional Employees International Union - Voice of the Electorate

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	2

D	D
1	3

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		327657.33
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	498576.93									
(c) Total Receipts (from Line 19)	35485.04	35485.04								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	534061.97	363142.37								
7. Total Disbursements (from Line 31)	6050.00	6050.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	528011.97	357092.37								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Office and Professional Employees International Union - Voice of the Electorate

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	2

D	D
1	3

Y	Y	Y	Y
2	0	0	8

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	18292.00	243184.75
(i) Itemized (use Schedule A)	17083.93	224873.68
(ii) Unitemized	35375.93	35375.93
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	35375.93	35375.93
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.)	109.11	109.11
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	35485.04	35485.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	35485.04	35485.04

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	2550.00	2550.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	2550.00	2550.00
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 Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	1500.00	1500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	6050.00	6050.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6050.00	6050.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	35375.93	35375.93
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35375.93	35375.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2550.00	2550.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2550.00	2550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 18 (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

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 - Voice of the Electorate

<p>A. Full Name (Last, First, Middle Initial) Richard Altig, Jr</p> <p>Mailing Address 13911 49TH AVENUE CT NW</p> <p>City State Zip Code GIG HARBOR WA 98332</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer American Income Life Occupation Insurance Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 828.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p>Transaction ID: C121131</p> <p>Amount of Each Receipt this Period 828.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	0	8												

<p>B. Full Name (Last, First, Middle Initial) RICK ALTIG Jr</p> <p>Mailing Address 10025 111th AVE NE</p> <p>City State Zip Code KIRKLAND WA 98033</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer American Income Life Occupation Insurance Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 832.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p>Transaction ID: C120945</p> <p>Amount of Each Receipt this Period 832.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	0	8												

<p>C. Full Name (Last, First, Middle Initial) David Cohen</p> <p>Mailing Address 140 N LAS PALMOS</p> <p>City State Zip Code Los Angeles CA 90004</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer American Income Life Occupation Insurance Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p>Transaction ID: C121133</p> <p>Amount of Each Receipt this Period 300.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	0	8												

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>1960.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 18
(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 - Voice of the Electorate

A. Full Name (Last, First, Middle Initial)
Micah A. COHEN

Mailing Address 140 N LAS PALMAS

City State Zip Code
LOS ANGELES CA 90004

FEC ID number of contributing federal political committee. C

Name of Employer American Income Life Occupation Insurance Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 03 / 2008
Transaction ID: C121132
Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Demario M Cooper

Mailing Address 724 Royal Anne Ln #105

City State Zip Code
Raleigh NC 27615

FEC ID number of contributing federal political committee. C

Name of Employer American Income Life Occupation Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 01 / 03 / 2008
Transaction ID: C121856
Amount of Each Receipt this Period 800.00

C. Full Name (Last, First, Middle Initial)
Donald Foti

Mailing Address PO BOX 2500

City State Zip Code
NAPA CA 94558

FEC ID number of contributing federal political committee. C

Name of Employer American Income Life Occupation Insurance Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 03 / 2008
Transaction ID: C122037
Amount of Each Receipt this Period 400.00

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 8 / 18
	<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 - Voice of the Electorate

A.	Full Name (Last, First, Middle Initial) Cindy Furer	Date of Receipt MM / DD / YYYY 01 / 03 / 2008
	Mailing Address 374 E Pelican Ct	Transaction ID: C121556
	City State Zip Code Fresno CA 93720-1254	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) Larry Geneser	Date of Receipt MM / DD / YYYY 01 / 03 / 2008
	Mailing Address 13515 S PEBBLEBROOK LN	Transaction ID: C121124
	City State Zip Code GREENWOOD MO 64034	Amount of Each Receipt this Period 800.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00	

C.	Full Name (Last, First, Middle Initial) Eric Giglione	Date of Receipt MM / DD / YYYY 01 / 03 / 2008
	Mailing Address 3 PARKWOOD DR	Transaction ID: C121449
	City State Zip Code COLTS NECK NJ 07722	Amount of Each Receipt this Period 800.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional)	▶	2200.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 18
(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 - Voice of the Electorate

A. Full Name (Last, First, Middle Initial)
Steven Greer

Mailing Address PO Box 208

City State Zip Code
Waco TX 76703-0208

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
NATIONAL INCOME LIFE Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 03 / 2008
Transaction ID: C122013

Amount of Each Receipt this Period 600.00

B. Full Name (Last, First, Middle Initial)
Frederick Hadayia Jr

Mailing Address 101 IRON VALLEY DR

City State Zip Code
LEBANON PA 17042

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
American Income Life Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 03 / 2008
Transaction ID: C120954

Amount of Each Receipt this Period 600.00

C. Full Name (Last, First, Middle Initial)
Mark Hancock

Mailing Address 12546 WALNUT RIDGE PL

City State Zip Code
FISHERS IN 46038

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
AMERICAN INCOME LIFE INS. CO. Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 03 / 2008
Transaction ID: C121089

Amount of Each Receipt this Period 600.00

SUBTOTAL of Receipts This Page (optional) 1800.00

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 10 / 18
(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 - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)
Steve Hartman

Mailing Address 3430 N MOUNTAIN RIDGE RD
#69

City MESA State AZ Zip Code 85207

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN INCOME LIFE INS. Occupation 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 Y
0 1 / 0 3 / 2 0 0 8

Transaction ID: C121518

Amount of Each Receipt this Period
600.00

B.

Full Name (Last, First, Middle Initial)
Rob Hay

Mailing Address PO Box 208

City Waco State TX Zip Code 76703-0208

FEC ID number of contributing federal political committee. **C**

Name of Employer American Income Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 3 / 2 0 0 8

Transaction ID: C122017

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
John Jatoft

Mailing Address 4071 PORT CHICAGO HWY
Suite 200

City CONCORD State CA Zip Code 94520

FEC ID number of contributing federal political committee. **C**

Name of Employer American Income Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 3 / 2 0 0 8

Transaction ID: C121587

Amount of Each Receipt this Period
400.00

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 11 / 18
	<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 - Voice of the Electorate

A.	Full Name (Last, First, Middle Initial) William Jennings		Date of Receipt																					
	Mailing Address 17961 E EUCLID PL		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	1		0	3		2	0	0	8														
	City State Zip Code AURORA CO 80016		Transaction ID: C121233																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00																						
Name of Employer American Income Life		Occupation Insurance Agent																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00																						

B.	Full Name (Last, First, Middle Initial) Christopher Q Lafond		Date of Receipt																					
	Mailing Address 8030 Sherwood Dr		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	1		0	3		2	0	0	8														
	City State Zip Code Presto PA 15142-1078		Transaction ID: C121900																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00																						
Name of Employer American Income Life		Occupation Insurance Agent																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00																						

C.	Full Name (Last, First, Middle Initial) Joe Manone		Date of Receipt																					
	Mailing Address N89 W15883 MAIN ST Suite 101		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	1		0	3		2	0	0	8														
	City State Zip Code MENOMONEE FALLS WI 53051		Transaction ID: C121998																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00																						
Name of Employer American Income Life		Occupation 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)	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: PAGE 12 / 18

(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 - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)

Jody Monahan

Mailing Address 5113 Rees Street

City State Zip Code
Omaha NE 68106-1754

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OPEIU Local #53 President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 8 / 2 0 0 8

Transaction ID: C122921

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Marc Morton

Mailing Address 2476 POWELL AVE

City State Zip Code
COLUMBUS OH 43209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
American Income Life Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 3 / 2 0 0 8

Transaction ID: C121378

Amount of Each Receipt this Period

800.00

C.

Full Name (Last, First, Middle Initial)

Eric J Neal

Mailing Address 209 Lambeth Ln

City State Zip Code
Saint Louis MO 63125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
American Income Life Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 3 / 2 0 0 8

Transaction ID: C121302

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)

1900.00

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 / 18
	<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 - Voice of the Electorate

A.	Full Name (Last, First, Middle Initial) DURHON RENAH R OLDHAM		Date of Receipt	
	Mailing Address 1995 HARRIS RD		M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: C121271
	PENFIELD	NY	14526	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		800.00	
Name of Employer American Income Life		Occupation Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00		

B.	Full Name (Last, First, Middle Initial) ROBERT OLSON, Jr		Date of Receipt	
	Mailing Address 26561 W HGHLAND DR		M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: C121403
	CHANNAHON	IL	60410	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		800.00	
Name of Employer American Income Life		Occupation Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00		

C.	Full Name (Last, First, Middle Initial) Marc E Rosen		Date of Receipt	
	Mailing Address 96 Rivington Ave		M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: C121983
	Staten Island	NY	10314	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		600.00	
Name of Employer National Income Life		Occupation 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)	▶	2200.00
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 / 18
	<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 - Voice of the Electorate

A.	Full Name (Last, First, Middle Initial) Paul D Rumbuc	Date of Receipt MM / DD / YYYY 01 / 03 / 2008
	Mailing Address 3570 MAGNOLOIA CT	Transaction ID: C121537
	City State Zip Code OAKLAND TOWNSHIP MI 48363	Amount of Each Receipt this Period 800.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00	

B.	Full Name (Last, First, Middle Initial) Imran Satti	Date of Receipt MM / DD / YYYY 01 / 03 / 2008
	Mailing Address PO Box 208	Transaction ID: C122026
	City State Zip Code Waco TX 76703-0208	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) James Surace	Date of Receipt MM / DD / YYYY 01 / 03 / 2008
	Mailing Address PO BOX 33160	Transaction ID: C122042
	City State Zip Code NORTH ROYALTON OH 44133	Amount of Each Receipt this Period 832.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 832.00	

SUBTOTAL of Receipts This Page (optional)	2232.00
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 15 / 18
	(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 - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial) Thomas Williams		Date of Receipt
Mailing Address 10246 SW 22nd PL		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 0 3 / 2 0 0 8
City	State	Zip Code
DAVIE	FL	33324
FEC ID number of contributing federal political committee.		Transaction ID: C120967
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 800.00
Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 800.00	

B.

Full Name (Last, First, Middle Initial) David Zophin		Date of Receipt
Mailing Address 101 GROUSE HILL RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 0 3 / 2 0 0 8
City	State	Zip Code
GLASTONBURY	CT	06033
FEC ID number of contributing federal political committee.		Transaction ID: C120952
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 800.00
Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 800.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1600.00
TOTAL This Period (last page this line number only)	<input type="text"/> 18292.00

**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)

PAGE 16 / 18

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A. Full Name (Last, First, Middle Initial) NEBCD PAC <hr/> Mailing Address 14215 Jones-Maltsberger <hr/> City San Antonio State TX Zip Code 78247 Purpose of Disbursement TX Dem.- 2008 Linda Chavez Thompson Candidate Name	Transaction ID: D300 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 500.00
B. Full Name (Last, First, Middle Initial) Ngp Software <hr/> Mailing Address 5505 Connecticut Ave NW # 277 <hr/> City Washington State DC Zip Code 20015-2601 Purpose of Disbursement PAC Software Candidate Name	Transaction ID: D310 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2000.00

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

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

2500.00

**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)

PAGE 17 / 18

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A.	Full Name (Last, First, Middle Initial) Ed Pastor	Transaction ID: D295 Date of Disbursement 01 / 11 / 2008
	Mailing Address PO Box 1978	Amount of Each Disbursement this Period 1000.00
	City Phoenix State AZ Zip Code 85001-1978	
	Purpose of Disbursement AZ 4th District US Congress	011 Category/ Type
	Candidate Name Ed Pastor	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Raul Grijalva	Transaction ID: D294 Date of Disbursement 01 / 11 / 2008
	Mailing Address P.O. Box 1242	Amount of Each Disbursement this Period 1000.00
	City Tucson State AZ Zip Code 85702	
	Purpose of Disbursement AZ 7th Dist. Congress	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

**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)

PAGE 18 / 18

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)

Friends of Michael Allen

Mailing Address P.O. Box 4870

City Santa Rosa State CA Zip Code 95402

Purpose of Disbursement
Santa Rosa City Council

Candidate Name
Michael Allen

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District: O

Transaction ID: D309

Date of Disbursement

02 / 12 / 2008

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Rod Tanner for Tarrant County

Mailing Address 6000 Western Place, Suite 100

City Fort Worth State TX Zip Code 76107

Purpose of Disbursement
Democratic Party Chair

Candidate Name
Rod Tanner

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District: O

Transaction ID: D301

Date of Disbursement

02 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

1500.00