FEC

STATEMENT OF

FORM 1	ORGANIZ <i>A</i>	ATION		
1 Ollin 1	(See instruction	ns)		Office use only
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
OPEIU JB Mo	ss Voice of the Electorate (VOTE)			
ADDRESS (number and	street) 80 Eighth Avenue, Su	uite 610 		
(Check if address	s			
X is changed)	New York		NY	10011 -
		CITY▲	STATE ▲	ZIP CODE 📥
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e-r	mail address)		
(Check if address is changed)	juliet@opeiudc.org			
io dilangoo)				
COMMITTEE WED	DACE ADDRESS (UDI.)			
COMMITTEE'S WEB	PAGE ADDRESS (URL) http://www.opeiu.org	•		
(Check if addres is changed)	s III. I I I I I I I I I I I I I I I I I	<u>' </u>		
2. DATE 0.5	18 2011			
3. FEC IDENTIFICA	ATION NUMBER	C C00007898		
4. IS THIS STATEM	MENT X NEW (N) OR	AMENDED (A)		
I certify that I have exam	ined this Statement and to the best of my know	wledge and belief it is true, correc	et and complete	
	Treasurer Mary Mahoney			
Type or Print Name of	Treasurer			
Signature of Treasurer	Electronically Filed by Mary Mah	oney	Date 05	18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fa	lse, erroneous, or incomplete information may			es of 2 U.S.C. §437g.
Office		For further informati		
Use		Federal Election Company Toll Free 800-424-953	mission	FEC FORM 1 (Revised 02/2009)

	F	EC F	Form 1 (Revised 02/2009)	Page 2
5.			OMMITTEE (Check One) Committee:	
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	he candidate
	Name Candid			
	Candid Party /		ion Office House Senate President	State District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Candid			
	Party	Comn		
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Politic	al Act	tion Committee (PAC):	
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
			Corporation Corporation w/o Capital Stock X La	bor Organization
			Membership Organization Trade Association C	ooperative
	(1)		In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d fund or party
			In addition, this committee is a Lobbyist/Registrant PAC.	
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint F	undra	aising Representative:	
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
		Com	nmittees Participating in Joint Fundraiser	
			1 FEC ID number C	
			2. FEC ID number	
			3. FEC ID number	
			EEC ID number C	

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Write or Type Committee N	lame				
OPEIU JB Moss V	oice of the Electo	orate (VOTE)			
6. Name of Any Connect	ted Organization, Af	filiated Committee, Jo	int Fundraising Repres	entative, or Lead	dership PAC Sponsor
Office and Professi	ional Employees	International Unior	n (OPEIU)	1 1 1 1 1	
				<u> </u>	
Mailing Address		80 Eighth Avenue	e, Suite 610		
		New York		LNY	10011
		CITY		STATE A	ZIP CODE
Relationship:			_		_
X Connected Organi	zation A	ffiliated Committee	Joint Fundraising Re	epresentative	Leadership PAC Sponsor
Mailing Address		80 Eighth Avenue	e, Suite 610		
		New York		_NY	10011
Title or Position ▼		CITY A		STATE	ZIP CODE A
Treas	surer		Telephone ni	umber 212	
name and address		(phone number o agent (e.g., assistar	ptional) of the treasu nt treasurer).	rer of the comn	nittee; and the
Mailing Address					
		80 Eighth Avenue	e, Suite 610		
		80 Eighth Avenue	e, Suite 610	_NY_	10011
Title or Position ▼		<u> </u>	e, Suite 610	NY_STATE A	10011
	surer	New York	e, Suite 610 Telephone n	STATE ▲	

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Full Name of Designated Agent			
Mailing Address			
Title or Position ▼	CITY A	STATE A	ZIP CODE A
	Teleph	none number	
Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository.	aintains funds.	mmittee deposits funds, ho	lds accounts, rents
	i bank		
Mailing Address	1101 Pennsylvania Avenue, NW		
	Washington	DC	20004 _
	CITY 🗖	STATE. △	ZIP CODE 🛕
Name of Bank, Depository	, etc.		
Cap	pitol One Bank		
Mailing Address	PO Box 1296		
	Laurel	MD	20707 _
	CITY 🗖	STATE ⊿	ZIP CODE 🛕

safety deposit boxes or maintain	List all banks or other depositories in which the commit is funds.	tice deposits rarias, riok	
Name of Bank, Depository, etc.			[ADDITIONAL]
Mailing Address			
		1 1 1 1 1 1 1	
	CITY 🗖	STATE ⊿	ZIP CODE 🛕
Name of Any Connected Orga	anization, Affiliated Committee, Joint Fundraising Rep	resentative or Leader	[ADDITIONAL
	(VOICE OF THE ELECTORATE)		I I I I I I I I I I I
	265 West 14th Street, 6th Floor		
Mailing Address			
	New York	」 ∟ <mark>NY</mark> ∟	10011
lationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising Rep	presentative Lea	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Dooignatou / tgont			
1			
Full Name			
1			
Full Name			
Full Name	CITY A		
Full Name	CITY A	STATE ▲	ZIP CODE A
Full Name		STATE &	ZIP CODE A
Full Name			

Banks or Other Depositories: safety deposit boxes or maintain:	List all banks or other depositories in which the committees funds.	ee deposits funds, hol	ds accounts, rents
Name of Bank, Depository, etc.			[ADDITIONAL]
Mailing Address			
	CITY 🛕	STATE ⊿	ZIP CODE 🛕
Name of Any Connected Orga	nization, Affiliated Committee, Joint Fundraising Repre	esentative, or Leade	[ADDITIONAL] rship PAC Sponsor
Industrial Tehnical and P	rofessional Employees		
Mailing Address	2222 Bull Street, Suite 200		
	Silver Spring		31401
Relationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising Repre	esentative Lea	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE▲	ZIP CODE A
	Telephon	ne number	
Joint Fundraiser Participant			[ADDITIONAL]
L	FEC	C ID number C	

Banks or Other Depositories: safety deposit boxes or maintain		millee deposits runds, noic	as accounts, rents
Name of Bank, Depository, etc.			[ADDITIONAL]
Mailing Address			
	_ 		
	CITY 🗻	STATE	ZIP CODE 🛕
	anization, Affiliated Committee, Joint Fundraising Renployees International Union Local 2 COPE	epresentative, or Leader	[ADDITIONAL ship PAC Sponsor
Mailing Address	8555 16th Street, Suite 550		
	Silver Spring	L MD	20910
ationship:	CITY▲	STATE	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising R	Representative Lead	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE &	ZIP CODE A
	Telep	phone number	
Joint Fundraiser Participant			[ADDITIONAL]