

# 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  
 Check if different than previously reported. (ACC)  
Washington DC 20036

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

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on 08 26 2008 in the State of FL  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on in the State of

5. Covering Period 07 24 2008 through 08 06 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 09 23 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**

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

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 2 | 4 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To: 

|   |   |
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| Y | Y | Y | Y |
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|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |           |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|-----------|
| 6. (a) Cash on Hand<br>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 |  | 468455.78 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |           |
| 2   | 0                       | 0                                 | 8 |   |   |   |   |   |  |           |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 445768.36               |                                   |   |   |   |   |   |   |  |           |
| (c) Total Receipts (from Line 19) .....   | 2270.14                 | 147632.72                         |   |   |   |   |   |   |  |           |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 448038.50               | 616088.50                         |   |   |   |   |   |   |  |           |
| 7. Total Disbursements (from Line 31) .....   | 57900.00                | 225950.00                         |   |   |   |   |   |   |  |           |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 390138.50               | 390138.50                         |   |   |   |   |   |   |  |           |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |           |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 5000.00                 |                                   |   |   |   |   |   |   |  |           |

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 | 7 |

|   |   |
|---|---|
| D | D |
| 2 | 4 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 8 |

|   |   |
|---|---|
| D | D |
| 0 | 6 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 176.96                        | 78464.99                          |
| (i) Itemized (use Schedule A) .....  | 2093.18                       | 68564.52                          |
| (ii) Unitemized .....  | 2270.14                       | 147029.51                         |
| (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) .....     | 2270.14                       | 147029.51                         |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 0.00                          | 603.21                            |
| 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)) .....                          | 2270.14                       | 147632.72                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 2270.14                       | 147632.72                         |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 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.....  | 1250.00                               | 32050.00                                  |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                          | 1250.00                               | 32050.00                                  |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                                  | 0.00                                      |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 55000.00                              | 186500.00                                 |
| 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.....   | 1650.00                               | 7400.00                                   |
| 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))..       | 57900.00                              | 225950.00                                 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 57900.00                              | 225950.00                                 |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                    | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) .....        | 2270.14                       | 147029.51                         |
| 34. Total Contribution Refunds (from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....   | 2270.14                       | 147029.51                         |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 1250.00                       | 32050.00                          |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) .....             | 1250.00                       | 32050.00                          |

**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 / 15 |
|   | <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

|   |  |  |   |
|---|--|--|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Walter Allen                |  | Date of Receipt<br>MM / DD / YYYY<br>08 / 01 / 2008 |
|   | Mailing Address 7419 Cuvier St   |  | <b>Transaction ID:</b> C138803                      |
|   | City<br>La Jolla   | State<br>CA  | Zip Code<br>92037                                   |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |  | Amount of Each Receipt this Period<br>20.00         |
|   | Name of Employer<br>OPEIU, LOCAL NO.30                                 | Occupation<br>Executive Director/Financial Officer |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>240.00                 |   |

|   |  |                                    |   |
|---|--|------------------------------------|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Patricia Chenault           |                                    | Date of Receipt<br>MM / DD / YYYY<br>08 / 05 / 2008 |
|   | Mailing Address 4558 Little Ridge Ln                                   |                                    | <b>Transaction ID:</b> C138813                      |
|   | City<br>Chesterfield   | State<br>VA                        | Zip Code<br>23832                                   |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |                                    | Amount of Each Receipt this Period<br>38.48         |
|   | Name of Employer<br>CWA local 2201                                     | Occupation<br>staff                |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>289.36 |   |

|   |  |                                    |   |
|---|--|------------------------------------|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Marianne Giordano           |                                    | Date of Receipt<br>MM / DD / YYYY<br>08 / 01 / 2008 |
|   | Mailing Address 5585 Brunswick Ave                                     |                                    | <b>Transaction ID:</b> C138808                      |
|   | City<br>San Diego  | State<br>CA                        | Zip Code<br>92120                                   |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |                                    | Amount of Each Receipt this Period<br>40.00         |
|   | Name of Employer<br>Kaiser   | Occupation<br>President            |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>380.00 |   |

|  |   |       |
|--|---|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 98.48 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |       |

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

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

FOR LINE NUMBER: PAGE 7 / 15

(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)

Tina Marie Littleton

Mailing Address 2619 Dalton Ave

City

Los Angeles

State

CA

Zip Code

90018-2725

FEC ID number of contributing federal political committee.

C

Name of Employer  
OPEIU LOCAL NO. 537

Occupation  
Vice President

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 30 / 2008

Transaction ID: C138751

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

Suzanne Terry

Mailing Address 818 Appomattox St

City

Hopewell

State

VA

Zip Code

23860

FEC ID number of contributing federal political committee.

C

Name of Employer  
CWA Local 2201

Occupation  
staff

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

289.36

Date of Receipt

M M / D D / Y Y Y Y  
08 / 05 / 2008

Transaction ID: C138812

Amount of Each Receipt this Period

38.48

**SUBTOTAL** of Receipts This Page (optional) .....

78.48

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

176.96

# 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"/> 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

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>A.</b>  | Full Name (Last, First, Middle Initial)<br>Jen Flanagan |   | <b>Transaction ID:</b> D352   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|  | Mailing Address 8 Boutelle Street                       |   | Date of Disbursement  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|  | City Leominster State MA Zip Code 01453                 |   | <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>8</td><td>/</td><td>0</td><td>1</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 | 8 | / | 0 | 1 | / | 2 | 0 | 0 | 8 |
|  | M   | M   | /   | D | D | / | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 0  | 8   | /   | 0   | 1 | / | 2 | 0 | 0 | 8 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Purpose of Disbursement MA-State Senate  |   | Amount of Each Disbursement this Period                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Candidate Name Jen Flanagan  |   | <table border="1"> <tr> <td>0</td><td>1</td> </tr> </table>       |   | 0 | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 0  | 1   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |   | Disbursement For: 2008  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| State: District: O   |   | <input type="checkbox"/> Primary <input type="checkbox"/> General |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|  |   | <input checked="" type="checkbox"/> Other (specify) ▼             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

|  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|--|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>B.</b>  | Full Name (Last, First, Middle Initial)<br>Jim Holbert |  | <b>Transaction ID:</b> D355   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|  | Mailing Address 189 Clay Lucas Drive                   |  | Date of Disbursement  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|  | City London State KY Zip Code 40744                    |  | <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>8</td><td>/</td><td>0</td><td>1</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 | 8 | / | 0 | 1 | / | 2 | 0 | 0 | 8 |
|  | M  | M  | /   | D | D | / | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 0  | 8  | /  | 0   | 1 | / | 2 | 0 | 0 | 8 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Purpose of Disbursement KY-Congress  |  | Amount of Each Disbursement this Period                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Candidate Name Jim Holbert   |  | <table border="1"> <tr> <td>0</td><td>1</td> </tr> </table>                  |   | 0 | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 0  | 1  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |  | Disbursement For: 2008   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| State: District:   |  | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|  |  | <input type="checkbox"/> Other (specify) ▼                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

|  |   |   |         |
|--|---|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | <table border="1"><tr><td>1250.00</td></tr></table> | 1250.00 |
| 1250.00  |   |   |         |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | <table border="1"><tr><td>1250.00</td></tr></table> | 1250.00 |
| 1250.00  |   |   |         |



# 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"/> 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)<br>Mark Begich   | Transaction ID: D367<br>Date of Disbursement<br>07 / 31 / 2008   |
|    | Mailing Address P.O. Box 240287  | Amount of Each Disbursement this Period<br>5000.00   |
|    | City Anchorage State AK Zip Code 99524   |  |
|    | Purpose of Disbursement 60 in the Senate Reception<br>Candidate Name   | 011<br>Category/Type   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Kay Hagan   | Transaction ID: D357<br>Date of Disbursement<br>08 / 01 / 2008   |
|    | Mailing Address 324 W wendover Ave   | Amount of Each Disbursement this Period<br>5000.00   |
|    | City Greensboro State NC Zip Code 27408  |  |
|    | Purpose of Disbursement 60 in the Senate Reception<br>Candidate Name   | 011<br>Category/Type   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Jeanne Shaheen  | Transaction ID: D362<br>Date of Disbursement<br>08 / 01 / 2008   |
|    | Mailing Address P.O. Box 1510  | Amount of Each Disbursement this Period<br>5000.00   |
|    | City Manchester State NH Zip Code 03105  |  |
|    | Purpose of Disbursement 60 in the Senate Reception<br>Candidate Name<br>Jeanne Shaheen   | 011<br>Category/Type   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 15000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |          |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 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)<br>Bruce Lunsford  | Transaction ID: D359<br>Date of Disbursement<br>08 / 01 / 2008   |
|    | Mailing Address 1500 Bardstown RD  | Amount of Each Disbursement this Period<br>5000.00   |
|    | City Louisville State KY Zip Code 40205  |  |
|    | Purpose of Disbursement 60 in the Senate Reception<br>Candidate Name   | 011<br>Category/Type   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Mark Warner   | Transaction ID: D365<br>Date of Disbursement<br>07 / 31 / 2008   |
|    | Mailing Address 1029 N Royal Street, 2nd Floor   | Amount of Each Disbursement this Period<br>5000.00   |
|    | City Alexandria State VA Zip Code 22314  |  |
|    | Purpose of Disbursement 60 in the Senate Reception<br>Candidate Name Mark Warner   | 011<br>Category/Type   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Jeff Merkley  | Transaction ID: D358<br>Date of Disbursement<br>08 / 01 / 2008   |
|    | Mailing Address 2326 NW Lovejoy  | Amount of Each Disbursement this Period<br>5000.00   |
|    | City Portland State OR Zip Code 97210  |  |
|    | Purpose of Disbursement 60 in the Senate Reception<br>Candidate Name   | 011<br>Category/Type   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 15000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |          |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 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)<br>Al Franken  | Transaction ID: D363<br>Date of Disbursement<br>07 / 31 / 2008 |
|    | Mailing Address P.O. Box 583144  | Amount of Each Disbursement this Period<br>5000.00             |
|    | City Minneapolis State MN Zip Code 55458   |  |
|    | Purpose of Disbursement 60 in the Senate Reception<br>Candidate Name Al Franken<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | 011<br>Category/<br>Type                                       |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Mark Udall  | Transaction ID: D361<br>Date of Disbursement<br>08 / 01 / 2008 |
|    | Mailing Address P.O. Box 40158   | Amount of Each Disbursement this Period<br>5000.00             |
|    | City Denver State CO Zip Code 80204  |  |
|    | Purpose of Disbursement 60 in the Senate Reception<br>Candidate Name Mark Udall<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | 011<br>Category/<br>Type                                       |

|    |   |  |
|----|---|--|
| C. | Full Name (Last, First, Middle Initial)<br>Tom Udall  | Transaction ID: D360<br>Date of Disbursement<br>08 / 01 / 2008 |
|    | Mailing Address 3311 Candelaria N.E., Ste. A  | Amount of Each Disbursement this Period<br>5000.00             |
|    | City Albuquerque State NM Zip Code 87107  |  |
|    | Purpose of Disbursement 60 in the Senate Reception<br>Candidate Name Tom Udall<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | 011<br>Category/<br>Type                                       |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 15000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |          |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 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)<br>Ronnie Musgrove   | Transaction ID: D356<br>Date of Disbursement<br>08 / 01 / 2008   |
|    | Mailing Address 735 N Congress St  | Amount of Each Disbursement this Period<br>5000.00   |
|    | City Jackson State MS Zip Code 39202   |  |
|    | Purpose of Disbursement 60 in the Senate Reception<br>Candidate Name   | 011<br>Category/<br>Type   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| B. | Full Name (Last, First, Middle Initial)<br>Tom Allen   | Transaction ID: D364<br>Date of Disbursement<br>07 / 31 / 2008   |
|    | Mailing Address 550 Forest Avenue, Suite 101   | Amount of Each Disbursement this Period<br>5000.00   |
|    | City Portland State ME Zip Code 04101  |  |
|    | Purpose of Disbursement 60 in the Senate Reception<br>Candidate Name Tom Allen   | 011<br>Category/<br>Type   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

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

10000.00

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

55000.00

# 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"/> 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)<br>Carol Strachan<br><hr/> Mailing Address 6035 Grand River Drive<br><hr/> City State Zip Code<br>Grand Ledge MI 48837<br><hr/> Purpose of Disbursement<br>MI-County Commissioner District 4<br><hr/> Candidate Name<br>Carol Strachan<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>State: District: O | Transaction ID: D346<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 8 / 0 1 / 2 0 0 8<br><hr/> Amount of Each Disbursement this Period<br>650.00 |
| B. | Full Name (Last, First, Middle Initial)<br>Clint Hall Fund<br><hr/> Mailing Address 238 Browder Road<br><hr/> City State Zip Code<br>Springtown TX 76082<br><hr/> Purpose of Disbursement<br>TX-Parker County Commissioner<br><hr/> Candidate Name<br>Clint Hall<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>State: District: O               | Transaction ID: D354<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 8 / 0 1 / 2 0 0 8<br><hr/> Amount of Each Disbursement this Period<br>500.00 |
| C. | Full Name (Last, First, Middle Initial)<br>Julia Fahey<br><hr/> Mailing Address 44 Mt. Auburn Street<br><hr/> City State Zip Code<br>Watertown MA 02472<br><hr/> Purpose of Disbursement<br>MA-State Representative<br><hr/> Candidate Name<br>Julia Fahey<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>State: District: O                     | Transaction ID: D351<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 8 / 0 1 / 2 0 0 8<br><hr/> Amount of Each Disbursement this Period<br>250.00 |

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

1400.00

**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)

PAGE 14 / 15

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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)

Ken Donnelly

Transaction ID: D348

Date of Disbursement

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

Mailing Address 1185 Massachusetts Avenue

City State Zip Code  
Arlington MA 02746

Amount of Each Disbursement this Period

|        |
|--------|
| 250.00 |
|--------|

Purpose of Disbursement

MA-State Senator

|                   |
|-------------------|
| 011               |
| Category/<br>Type |

Candidate Name

Ken Donnelly

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District: O

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

|        |
|--------|
| 250.00 |
|--------|

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

|         |
|---------|
| 1650.00 |
|---------|

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |                                      |  |
|---|--------------------------------------|--|
| (Use separate schedule(s) for each numbered line) | PAGE 15 / 15                         |  |
|   | FOR LINE NUMBER:<br>(check only one) | <input type="checkbox"/> 9<br><input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)  
Office and Professional Employees International Union - Voice of the Electorate

|  |       |          |  |
|--|-------|----------|--|
| <b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b><br>Hillary Clinton for President |       |          | Nature of Debt (Purpose):<br>Retire Debt |
| Mailing Address 420 Lexington Avenue<br>Suite 3030   |       |          |  |
| City   | State | ZIP Code |  |
| New York   | NY    | 10170    |  |

|   |                     |   |  |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period |                     | <b>Transaction ID: D345</b>                 |  |
| 0.00                                      |                     |   |  |
| Amount Incurred This Period               | Payment This Period | Outstanding Balance at Close of This Period |  |
| 5000.00                                   | 0.00                | 5000.00                                     |  |

|  |         |
|--|---------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional).....                                      | 5000.00 |
| 2) <b>TOTALS</b> This Period (last page this line number only).....                            | 5000.00 |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....                        | 0.00    |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) | 5000.00 |