

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

OPEIU JB Moss Voice of the Electorate (VOTE)

ADDRESS (number and street)

80 Eighth Avenue, Suite 610

☐ Check if different than previously reported. (ACC)

New York

NY

10011

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 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
Year-End 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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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 Ms. Mary Mahoney

Signature of Treasurer

Ms. Mary Mahoney

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

OPEIU JB Moss Voice of the Electorate (VOTE)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2011 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2011		433215.51
(b) Cash on Hand at Beginning of Reporting Period.....	433215.51	
(c) Total Receipts (from Line 19)	118255.38	118255.38
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	551470.89	551470.89
7. Total Disbursements (from Line 31)	46081.90	46081.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	505388.99	505388.99
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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

OPEIU JB Moss Voice of the Electorate (VOTE)

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

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).....	42367.09	42367.09
(ii) Unitemized	75440.72	75440.72
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	117807.81	117807.81
(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) ►	117807.81	117807.81
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.).....	447.57	447.57
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))..... ►	118255.38	118255.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ►	118255.38	118255.38

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	3050.00	3050.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3050.00	3050.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	43000.00	43000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	4048.00	4048.00
(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)).....	4048.00	4048.00
29. Other Disbursements	-4016.10	-4016.10
30. Federal Election Activity (2 U.S.C. §431(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)) ..	46081.90	46081.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46081.90	46081.90

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	117807.81	117807.81
34. Total Contribution Refunds (from Line 28(d))	4048.00	4048.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	113759.81	113759.81
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	3050.00	3050.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	3050.00	3050.00

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

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

FOR LINE NUMBER: PAGE 6 OF 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. John R Akers

Mailing Address 6901 W 138Th Ter #418

City State Zip Code
 Overland Park KS 66223

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3935352

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. John R Akers

Mailing Address 6901 W 138Th Ter #418

City State Zip Code
 Overland Park KS 66223

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3935353

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. John R Akers

Mailing Address 6901 W 138Th Ter #418

City State Zip Code
 Overland Park KS 66223

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3935354

Amount of Each Receipt this Period

100.00

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 7 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Walter Allen

Mailing Address 7419 Cuvier St

City State Zip Code
 La Jolla CA 92037

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU, LOCAL NO.30

Occupation

Executive Director/Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

01 / 25 / 2011

Transaction ID : C4536003

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Walter Allen

Mailing Address 7419 Cuvier St

City State Zip Code
 La Jolla CA 92037

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU, LOCAL NO.30

Occupation

Executive Director/Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

01 / 26 / 2011

Transaction ID : C3676315

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Walter Allen

Mailing Address 7419 Cuvier St

City State Zip Code
 La Jolla CA 92037

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU, LOCAL NO.30

Occupation

Executive Director/Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

03 / 07 / 2011

Transaction ID : C3715307

Amount of Each Receipt this Period

50.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 112
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Walter Allen

Mailing Address 7419 Cuvier St

City State Zip Code
La Jolla CA 92037

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU, LOCAL NO.30

Occupation

Executive Director/Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2011

Transaction ID : C3737710

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Walter Allen

Mailing Address 7419 Cuvier St

City State Zip Code
La Jolla CA 92037

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU, LOCAL NO.30

Occupation

Executive Director/Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2011

Transaction ID : C3906413

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Walter Allen

Mailing Address 7419 Cuvier St

City State Zip Code
La Jolla CA 92037

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU, LOCAL NO.30

Occupation

Executive Director/Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2011

Transaction ID : C3906615

Amount of Each Receipt this Period

40.00

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

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

122.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Richard JR Altig

Mailing Address 15440 Bel-Red Rd

City

Redmond

State

WA

Zip Code

98052

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 ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935615

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

B. Richard JR Altig

Mailing Address 15440 Bel-Red Rd

City

Redmond

State

WA

Zip Code

98052

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 ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935616

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

C. Richard JR Altig

Mailing Address 15440 Bel-Red Rd

City

Redmond

State

WA

Zip Code

98052

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 ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935617

Amount of Each Receipt this Period

416.00

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

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

1248.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Luis Alvarez

Mailing Address 15440 Bel-Red Rd

City State Zip Code
 Redmond WA 98052

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life ins.

Occupation

Ins. Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935618

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

B. Simon A Arias

Mailing Address 224 Stockton Ridge

City State Zip Code
 Cranberry Township PA 16606

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. 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 / 11 / 2011

Transaction ID : C3935359

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Simon A Arias

Mailing Address 224 Stockton Ridge

City State Zip Code
 Cranberry Township PA 16606

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. 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 / 11 / 2011

Transaction ID : C3935360

Amount of Each Receipt this Period

100.00

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

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

616.00

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Simon A Arias

Mailing Address 224 Stockton Ridge

City State Zip Code
 Cranberry Township PA 16606

FEC ID number of contributing
federal political committee.

C

Name of Employer
 American Income Life Ins.

Occupation
 Ins. Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935361

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. James Bailey

Mailing Address 200 Ne Topaz Dr

City State Zip Code
 Lees Summit MO 64086

FEC ID number of contributing
federal political committee.

C

Name of Employer
 American Income Life Ins.

Occupation
 Ins. Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935363

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. James Bailey

Mailing Address 200 Ne Topaz Dr

City State Zip Code
 Lees Summit MO 64086

FEC ID number of contributing
federal political committee.

C

Name of Employer
 American Income Life Ins.

Occupation
 Ins. Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935364

Amount of Each Receipt this Period

100.00

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 12 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. James Bailey

Mailing Address 200 Ne Topaz Dr

City State Zip Code
 Lees Summit MO 64086

FEC ID number of contributing
federal political committee.

C

Name of Employer
 American Income Life Ins.

Occupation
 Ins. 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 / 11 / 2011

Transaction ID : C3935365

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Yaroslav Bitman

Mailing Address 4704 Saratoga Falls Ln

City State Zip Code
 Raleigh NC 27614

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

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3926866

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Yaroslav Bitman

Mailing Address 4704 Saratoga Falls Ln

City State Zip Code
 Raleigh NC 27614

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

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3926868

Amount of Each Receipt this Period

100.00

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 13 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Yaroslav Bitman

Mailing Address 4704 Saratoga Falls Ln

City State Zip Code
 Raleigh NC 27614

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

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3926870

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Gary Bleier

Mailing Address 917A Windfield Pl

City State Zip Code
 Appleton WI 54911

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

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935369

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Gary Bleier

Mailing Address 917A Windfield Pl

City State Zip Code
 Appleton WI 54911

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

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935370

Amount of Each Receipt this Period

100.00

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 14 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Gary Bleier

Mailing Address 917A Windfield PI

City

Appleton

State

WI

Zip Code

54911

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

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935371

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Eric L Cochran

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

American Income Life Insurance

Occupation

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 / 11 / 2011

Transaction ID : C3935376

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Eric L Cochran

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

American Income Life Insurance

Occupation

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 / 11 / 2011

Transaction ID : C3935377

Amount of Each Receipt this Period

100.00

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 15 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Eric L Cochran

Mailing Address 1301 Se Princeton Pl

City State Zip Code
 Lees Summit MO 64081

FEC ID number of contributing
federal political committee.

C

Name of Employer
 American Income Life Insurance

Occupation
 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 / 11 / 2011

Transaction ID : C3935378

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. David Cohen

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code
 Los Angeles CA 90036

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3927268

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. David Cohen

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code
 Los Angeles CA 90036

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3927270

Amount of Each Receipt this Period

150.00

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

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

400.00

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 16 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. David Cohen

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code
 Los Angeles CA 90036

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 ▼

450.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3927272

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Micah Cohen

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code
 Los Angeles CA 90036

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

04 / 11 / 2011

Transaction ID : C3935524

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Micah Cohen

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code
 Los Angeles CA 90036

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

04 / 11 / 2011

Transaction ID : C3935526

Amount of Each Receipt this Period

150.00

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

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

450.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Micah Cohen

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code
Los Angeles CA 90036

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 Y
04 / 11 / 2011

Transaction ID : C3935528

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Micah Cohen

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code
Los Angeles CA 90036

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 Y
04 / 11 / 2011

Transaction ID : C3935530

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Demario Cooper

Mailing Address 630 Calvert St #205

City State Zip Code
Charlotte NC 28208

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935309

Amount of Each Receipt this Period

80.00

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

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

380.00

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 18 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Demario Cooper

Mailing Address 630 Calvert St #205

City

Charlotte

State

NC

Zip Code

28208

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935311

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

B. Demario Cooper

Mailing Address 630 Calvert St #205

City

Charlotte

State

NC

Zip Code

28208

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935313

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

c. Narinder S Dhillon

Mailing Address 6339 Macadam Way

City

Dimondale

State

MI

Zip Code

48821

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 ▼

208.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935380

Amount of Each Receipt this Period

8.00

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

168.00

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 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Narinder S Dhillon

Mailing Address 6339 Macadam Way

City

Dimondale

State

MI

Zip Code

48821

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 ▼

208.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935381

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Narinder S Dhillon

Mailing Address 6339 Macadam Way

City

Dimondale

State

MI

Zip Code

48821

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 ▼

208.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935382

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Steven J DiCHIARO

Mailing Address 3337 Grenache St

City

Greeley

State

CO

Zip Code

80634

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 ▼

900.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3926887

Amount of Each Receipt this Period

300.00

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

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

500.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Steven J DiCHIARO

Mailing Address 3337 Grenache St

City State Zip Code
 Greeley CO 80634

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 ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3926889

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Steven J DiCHIARO

Mailing Address 3337 Grenache St

City State Zip Code
 Greeley CO 80634

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 ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3926891

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Jason Dickson

Mailing Address 3337 Grenache St

City State Zip Code
 Evans CO 80634

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935588

Amount of Each Receipt this Period

300.00

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

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

900.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 112
(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)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Oldham Durhon

Mailing Address PO Box 208

City	State	Zip Code
Waco	TX	76703

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2011

Transaction ID : C3935625

Amount of Each Receipt this Period

1600.00

Full Name (Last, First, Middle Initial)

B. Laura Fisher

Mailing Address 44 Black Bear Dr #1228

City	State	Zip Code
Waltham	MA	02451

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

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2011

Transaction ID : C3935399

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Laura Fisher

Mailing Address 44 Black Bear Dr #1228

City	State	Zip Code
Waltham	MA	02451

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

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2011

Transaction ID : C3935401

Amount of Each Receipt this Period

100.00

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

1800.00

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 22 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Laura Fisher

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

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935403

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Benjamin A Foti

Mailing Address 4533 Waterford Way

City
Oakley

State
CA

Zip Code
94561

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

04 / 11 / 2011

Transaction ID : C3935550

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Benjamin A Foti

Mailing Address 4533 Waterford Way

City
Oakley

State
CA

Zip Code
94561

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

04 / 11 / 2011

Transaction ID : C3935552

Amount of Each Receipt this Period

200.00

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

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

500.00

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Benjamin A Foti

Mailing Address 4533 Waterford Way

City State Zip Code
Oakley CA 94561

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 Y
04 / 11 / 2011

Transaction ID : C3935554

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Donald Foti

Mailing Address 4071 Port Chicago Hwy St 200

City State Zip Code
Concord CA 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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3927344

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Donald Foti

Mailing Address 4071 Port Chicago Hwy St 200

City State Zip Code
Concord CA 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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3927346

Amount of Each Receipt this Period

200.00

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

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

600.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Donald Foti

Mailing Address 4071 Port Chicago Hwy St 200

City State Zip Code
Concord CA 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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3927348

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Cindy Furer

Mailing Address 5703 Oberlin Dr Suite 106

City State Zip Code
San Diego CA 92121

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935534

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Cindy Furer

Mailing Address 5703 Oberlin Dr Suite 106

City State Zip Code
San Diego CA 92121

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935536

Amount of Each Receipt this Period

150.00

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

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

500.00

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 25 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Cindy Furer

Mailing Address 5703 Oberlin Dr Suite 106

City State Zip Code
 San Diego CA 92121

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935538

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Eric Giglione

Mailing Address 38 Windsor Ln

City State Zip Code
 Little Silver NJ 07739

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935606

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

C. Eric Giglione

Mailing Address 38 Windsor Ln

City State Zip Code
 Little Silver NJ 07739

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935607

Amount of Each Receipt this Period

400.00

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

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

950.00

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 26 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Eric Giglione

Mailing Address 38 Windsor Ln

City

Little Silver

State

NJ

Zip Code

07739

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 ▼

600.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935608

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. Sara Gilley

Mailing Address 38 Windsor Ln

City

Little Silver

State

NJ

Zip Code

07739

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 ▼

400.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935609

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

C. Carl Michael Goodwin

Mailing Address 54 E Pierrepont Ave

City

Rutherford

State

NJ

Zip Code

07070-2331

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 09 / 2011

Transaction ID : C3701940

Amount of Each Receipt this Period

100.00

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

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

900.00

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 27 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Carl Michael Goodwin

Mailing Address 54 E Pierrepont Ave

City

Rutherford

State

NJ

Zip Code

07070-2331

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

04 / 07 / 2011

Transaction ID : C3827917

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Carl Michael Goodwin

Mailing Address 54 E Pierrepont Ave

City

Rutherford

State

NJ

Zip Code

07070-2331

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

05 / 09 / 2011

Transaction ID : C3906236

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Carl Michael Goodwin

Mailing Address 54 E Pierrepont Ave

City

Rutherford

State

NJ

Zip Code

07070-2331

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

06 / 20 / 2011

Transaction ID : C3936837

Amount of Each Receipt this Period

150.00

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

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

350.00

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 28 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Mark R Gorman

Mailing Address 4337 Sweet Clover Ln

City State Zip Code
 Crowley TX 76036

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 ▼

300.00

Date of Receipt

MM / DD / YYYY
 04 / 11 / 2011

Transaction ID : C3935407

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mark R Gorman

Mailing Address 4337 Sweet Clover Ln

City State Zip Code
 Crowley TX 76036

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 ▼

300.00

Date of Receipt

MM / DD / YYYY
 04 / 11 / 2011

Transaction ID : C3935408

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Mark R Gorman

Mailing Address 4337 Sweet Clover Ln

City State Zip Code
 Crowley TX 76036

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 ▼

300.00

Date of Receipt

MM / DD / YYYY
 04 / 11 / 2011

Transaction ID : C3935409

Amount of Each Receipt this Period

100.00

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 29 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Arthur J J Greene

Mailing Address 1837 Squirrel Valley Dr

City

Bloomfield Hills

State

MI

Zip Code

48304

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

04 / 11 / 2011

Transaction ID : C3935411

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Arthur J J Greene

Mailing Address 1837 Squirrel Valley Dr

City

Bloomfield Hills

State

MI

Zip Code

48304

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

04 / 11 / 2011

Transaction ID : C3935412

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Arthur J J Greene

Mailing Address 1837 Squirrel Valley Dr

City

Bloomfield Hills

State

MI

Zip Code

48304

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

04 / 11 / 2011

Transaction ID : C3935413

Amount of Each Receipt this Period

100.00

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Steven K Greer

Mailing Address 43 Nocturne Woods Pl

City

The Woodlands

State

TX

Zip Code

77382

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN INCOME LIFE INSURANCE

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3927149

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Steven K Greer

Mailing Address 43 Nocturne Woods Pl

City

The Woodlands

State

TX

Zip Code

77382

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN INCOME LIFE INSURANCE

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3927150

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Steven K Greer

Mailing Address 43 Nocturne Woods Pl

City

The Woodlands

State

TX

Zip Code

77382

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN INCOME LIFE INSURANCE

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3927151

Amount of Each Receipt this Period

300.00

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

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

900.00

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 31 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Theodore Greer

Mailing Address 43 Nocturne Woods Pl

City

The Woodlands

State

TX

Zip Code

77382

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935590

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Frederick Hadayia Jr

Mailing Address 101 Iron Valley Dr

City

Lebanon

State

PA

Zip Code

17042

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 ▼

904.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3926914

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Frederick Hadayia Jr

Mailing Address 101 Iron Valley Dr

City

Lebanon

State

PA

Zip Code

17042

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 ▼

904.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3926915

Amount of Each Receipt this Period

300.00

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

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

900.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 112

<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)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Frederick Hadayia Jr

Mailing Address 101 Iron Valley Dr

City

Lebanon

State

PA

Zip Code

17042

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 ▼

904.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2011

Transaction ID : C3935591

Amount of Each Receipt this Period

4.00

Full Name (Last, First, Middle Initial)

B. Frederick Hadayia Jr

Mailing Address 101 Iron Valley Dr

City

Lebanon

State

PA

Zip Code

17042

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 ▼

904.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2011

Transaction ID : C3935592

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Alvin Hagens

Mailing Address 101 Iron Valley Dr

City

Lebanon

State

PA

Zip Code

17042

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 ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2011

Transaction ID : C3935593

Amount of Each Receipt this Period

300.00

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

604.00

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 33 OF 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. 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
 AMERICAN INCOME LIFE INS. CO.

Occupation
 Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3926815

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. 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
 AMERICAN INCOME LIFE INS. CO.

Occupation
 Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3926816

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. 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
 AMERICAN INCOME LIFE INS. CO.

Occupation
 Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3926817

Amount of Each Receipt this Period

300.00

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

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

900.00

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 34 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. William Hand

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

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935594

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Steve Y Hartman

Mailing Address 8228 S Homestead Lane

City

Tempe

State

AZ

Zip Code

85284

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935595

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Steve Y Hartman

Mailing Address 8228 S Homestead Lane

City

Tempe

State

AZ

Zip Code

85284

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935596

Amount of Each Receipt this Period

300.00

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

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

900.00

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 35 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Steve Y Hartman

Mailing Address 8228 S Homestead Lane

City State Zip Code
 Tempe AZ 85284

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935597

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Daniel Hartwig

Mailing Address 8228 S Homestead Lane

City State Zip Code
 Tempe AZ 85284

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935598

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Rob Hay

Mailing Address 4405 Cox Rd Ste 110

City State Zip Code
 Glen Allen VA 23060

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3927261

Amount of Each Receipt this Period

250.00

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

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

850.00

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 36 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Rob Hay

Mailing Address 4405 Cox Rd Ste 110

City State Zip Code
 Glen Allen VA 23060

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3927262

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Rob Hay

Mailing Address 4405 Cox Rd Ste 110

City State Zip Code
 Glen Allen VA 23060

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3927263

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Willie Hayden

Mailing Address 4405 Cox Rd Ste 110

City State Zip Code
 Glen Allen VA 23060

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3935583

Amount of Each Receipt this Period

250.00

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 37 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Billie Faye Headrick

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

OPEIU

Occupation

Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

01 / 21 / 2011

Transaction ID : C3675745

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Billie Faye Headrick

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

OPEIU

Occupation

Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

02 / 18 / 2011

Transaction ID : C3697235

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Billie Faye Headrick

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

OPEIU

Occupation

Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

03 / 09 / 2011

Transaction ID : C3701942

Amount of Each Receipt this Period

40.00

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

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

120.00

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

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

FOR LINE NUMBER: PAGE 38 OF 112
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Billie Faye Headrick

Mailing Address 3935 Hamill Rd

City State Zip Code
Hixson TN 37343-3516

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 07 / 2011

Transaction ID : C3827919

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Billie Faye Headrick

Mailing Address 3935 Hamill Rd

City State Zip Code
Hixson TN 37343-3516

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2011

Transaction ID : C3906238

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Billie Faye Headrick

Mailing Address 3935 Hamill Rd

City State Zip Code
Hixson TN 37343-3516

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 20 / 2011

Transaction ID : C3936839

Amount of Each Receipt this Period

60.00

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

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

140.00

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 39 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Matt M Henderson

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

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935584

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Matt M Henderson

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

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935585

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Matt M Henderson

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

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935586

Amount of Each Receipt this Period

250.00

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

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

750.00

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 40 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Shannon Henderson

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

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935587

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Christopher Hernandez

Mailing Address 3003 Douglas Ave #17

City

Dallas

State

TX

Zip Code

75219

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

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3927258

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Christopher Hernandez

Mailing Address 3003 Douglas Ave #17

City

Dallas

State

TX

Zip Code

75219

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

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3927259

Amount of Each Receipt this Period

100.00

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

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

450.00

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

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

FOR LINE NUMBER: PAGE 41 OF 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Christopher Hernandez

Mailing Address 3003 Douglas Ave #17

City State Zip Code
 Dallas TX 75219

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

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3927260

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Matthew P Hogan

Mailing Address 1701B Ellington Rd

City State Zip Code
 Conyers GA 30013

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3935419

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Matthew P Hogan

Mailing Address 1701B Ellington Rd

City State Zip Code
 Conyers GA 30013

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3935420

Amount of Each Receipt this Period

100.00

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 42 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Matthew P Hogan

Mailing Address 1701B Ellington Rd

City State Zip Code
 Conyers GA 30013

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935421

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. John W Jatoft

Mailing Address 4071 Port Chicago Hwy
 Suite 200

City State Zip Code
 Concord CA 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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3926830

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. John W Jatoft

Mailing Address 4071 Port Chicago Hwy
 Suite 200

City State Zip Code
 Concord CA 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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3926832

Amount of Each Receipt this Period

200.00

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

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

500.00

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 43 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. John W Jatoft

Mailing Address 4071 Port Chicago Hwy
Suite 200

City State Zip Code
Concord CA 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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3926834

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Horace W Johnson

Mailing Address 12435 Black Water Ct

City State Zip Code
Jacksonville FL 32223

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 ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3927051

Amount of Each Receipt this Period

108.00

Full Name (Last, First, Middle Initial)

C. Horace W Johnson

Mailing Address 12435 Black Water Ct

City State Zip Code
Jacksonville FL 32223

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 ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3927052

Amount of Each Receipt this Period

100.00

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

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

408.00

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 44 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Horace W Johnson

Mailing Address 12435 Black Water Ct

City

Jacksonville

State

FL

Zip Code

32223

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 ▼

308.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3927053

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Scott A Keeney

Mailing Address 7D School Court

City

Bristol

State

RI

Zip Code

02809

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935562

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Scott A Keeney

Mailing Address 7D School Court

City

Bristol

State

RI

Zip Code

02809

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935564

Amount of Each Receipt this Period

200.00

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

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

500.00

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 45 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Terry Keller

Mailing Address 1137 Wlper St
Apt 26

City State Zip Code
Hayward CA 94541-6768

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Business Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 18 / 2011

Transaction ID : C3666848

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Terry Keller

Mailing Address 1137 Wlper St
Apt 26

City State Zip Code
Hayward CA 94541-6768

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Business Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2011

Transaction ID : C3697062

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Terry Keller

Mailing Address 1137 Wlper St
Apt 26

City State Zip Code
Hayward CA 94541-6768

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Business Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 14 / 2011

Transaction ID : C3701738

Amount of Each Receipt this Period

40.00

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

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

130.00

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

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

FOR LINE NUMBER: PAGE 46 OF 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Terry Keller

Mailing Address 1137 Wlper St
Apt 26

City State Zip Code
Hayward CA 94541-6768

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Business Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3828479

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Terry Keller

Mailing Address 1137 Wlper St
Apt 26

City State Zip Code
Hayward CA 94541-6768

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Business Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2011

Transaction ID : C3901737

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Terry Keller

Mailing Address 1137 Wlper St
Apt 26

City State Zip Code
Hayward CA 94541-6768

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Business Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 29 / 2011

Transaction ID : C3936825

Amount of Each Receipt this Period

50.00

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 47 OF 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Steven E King

Mailing Address 24324 Lynwood Dr

City State Zip Code
 Novi MI 48374

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

M M / D D / Y Y Y Y Y
 04 11 2011

Transaction ID : C3927108

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Steven E King

Mailing Address 24324 Lynwood Dr

City State Zip Code
 Novi MI 48374

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

M M / D D / Y Y Y Y Y
 04 11 2011

Transaction ID : C3927109

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Steven E King

Mailing Address 24324 Lynwood Dr

City State Zip Code
 Novi MI 48374

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

M M / D D / Y Y Y Y Y
 04 11 2011

Transaction ID : C3927110

Amount of Each Receipt this Period

100.00

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 48 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Kevin Kistler

Mailing Address 6225 Starwood Way

City

Rockville

State

MD

Zip Code

20852-3530

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Dir. Organ. & Field Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 21 / 2011

Transaction ID : C3675757

Amount of Each Receipt this Period

76.92

Full Name (Last, First, Middle Initial)

B. Kevin Kistler

Mailing Address 6225 Starwood Way

City

Rockville

State

MD

Zip Code

20852-3530

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Dir. Organ. & Field Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2011

Transaction ID : C3697223

Amount of Each Receipt this Period

76.92

Full Name (Last, First, Middle Initial)

C. Kevin Kistler

Mailing Address 6225 Starwood Way

City

Rockville

State

MD

Zip Code

20852-3530

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Dir. Organ. & Field Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2011

Transaction ID : C3701955

Amount of Each Receipt this Period

76.92

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

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

230.76

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 49 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Kevin Kistler

Mailing Address 6225 Starwood Way

City

Rockville

State

MD

Zip Code

20852-3530

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Dir. Organ. & Field Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 07 / 2011

Transaction ID : C3827931

Amount of Each Receipt this Period

76.92

Full Name (Last, First, Middle Initial)

B. Kevin Kistler

Mailing Address 6225 Starwood Way

City

Rockville

State

MD

Zip Code

20852-3530

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Dir. Organ. & Field Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2011

Transaction ID : C3906254

Amount of Each Receipt this Period

76.92

Full Name (Last, First, Middle Initial)

C. Kevin Kistler

Mailing Address 6225 Starwood Way

City

Rockville

State

MD

Zip Code

20852-3530

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Dir. Organ. & Field Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 20 / 2011

Transaction ID : C3937069

Amount of Each Receipt this Period

115.38

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

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

269.22

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 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Samuel G Lasala

Mailing Address 221 Timberline Dr

City

Madison

State

MS

Zip Code

39110

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935433

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Samuel G Lasala

Mailing Address 221 Timberline Dr

City

Madison

State

MS

Zip Code

39110

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935434

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Samuel G Lasala

Mailing Address 221 Timberline Dr

City

Madison

State

MS

Zip Code

39110

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935435

Amount of Each Receipt this Period

100.00

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 51 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Michael A Libassi

Mailing Address 2532 Baneberry Ln #713

City
Indianapolis

State Zip Code
IN 46268

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935437

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Michael A Libassi

Mailing Address 2532 Baneberry Ln #713

City
Indianapolis

State Zip Code
IN 46268

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935438

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Michael A Libassi

Mailing Address 2532 Baneberry Ln #713

City
Indianapolis

State Zip Code
IN 46268

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935439

Amount of Each Receipt this Period

100.00

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 52 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Robert C Liles

Mailing Address 6762 S. 73Rd Cir

City State Zip Code
 Ralston NE 68127

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. 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 / 11 / 2011

Transaction ID : C3935441

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Robert C Liles

Mailing Address 6762 S. 73Rd Cir

City State Zip Code
 Ralston NE 68127

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. 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 / 11 / 2011

Transaction ID : C3935442

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Robert C Liles

Mailing Address 6762 S. 73Rd Cir

City State Zip Code
 Ralston NE 68127

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. 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 / 11 / 2011

Transaction ID : C3935443

Amount of Each Receipt this Period

100.00

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 53 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Joseph Manone

Mailing Address N89 W15883 Main St

City

Menomonee Falls

State

WI

Zip Code

53051

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 ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935599

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Joseph Manone

Mailing Address N89 W15883 Main St

City

Menomonee Falls

State

WI

Zip Code

53051

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 ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935600

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Joseph Manone

Mailing Address N89 W15883 Main St

City

Menomonee Falls

State

WI

Zip Code

53051

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 ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935601

Amount of Each Receipt this Period

300.00

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

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

900.00

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 54 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Sharon Manone

Mailing Address N89 W15883 Main St

City

Menomonee Falls

State

WI

Zip Code

53051

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3927264

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Sharon Manone

Mailing Address N89 W15883 Main St

City

Menomonee Falls

State

WI

Zip Code

53051

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3927265

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

C. Sharon Manone

Mailing Address N89 W15883 Main St

City

Menomonee Falls

State

WI

Zip Code

53051

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3927266

Amount of Each Receipt this Period

5.00

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

310.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 112

<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)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Sharon Manone

Mailing Address N89 W15883 Main St

City

Menomonee Falls

State

WI

Zip Code

53051

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2011

Transaction ID : C3927267

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

B. Rosen Marc E

Mailing Address 96 Rivington Ave

City

Staten Island

State

NY

Zip Code

10314

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Income Life

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2011

Transaction ID : C3935621

Amount of Each Receipt this Period

1200.00

Full Name (Last, First, Middle Initial)

C. Timothy P Matteson

Mailing Address 13319 S 21St St

City

Bixby

State

OK

Zip Code

74008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2011

Transaction ID : C3935445

Amount of Each Receipt this Period

100.00

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

1305.00

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 56 OF 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Timothy P Matteson

Mailing Address 13319 S 21St St

City State Zip Code
 Bixby OK 74008

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

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 11 2011

Transaction ID : C3935447

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Timothy P Matteson

Mailing Address 13319 S 21St St

City State Zip Code
 Bixby OK 74008

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

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 11 2011

Transaction ID : C3935449

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Tim R McAdams

Mailing Address 3645 Marketplace Blvd #130-298

City State Zip Code
 East Point GA 30344

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3927350

Amount of Each Receipt this Period

100.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Tim R McAdams

Mailing Address 3645 Marketplace Blvd #130-298

City State Zip Code
 East Point GA 30344

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

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3927351

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Tim R McAdams

Mailing Address 3645 Marketplace Blvd #130-298

City State Zip Code
 East Point GA 30344

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

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3927352

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Mathew R Mealey

Mailing Address 425 Beachfront Dr

City State Zip Code
 Evansville IN 47715

FEC ID number of contributing federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. 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 11 2011

Transaction ID : C3935454

Amount of Each Receipt this Period

100.00

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 58 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Mathew R Mealey

Mailing Address 425 Beachfront Dr

City

Evansville

State

IN

Zip Code

47715

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935455

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mathew R Mealey

Mailing Address 425 Beachfront Dr

City

Evansville

State

IN

Zip Code

47715

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935456

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Carla A Miller

Mailing Address 751 Jacobs Mill Pond Rd #814

City

Elgin

State

SC

Zip Code

29045

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

04 / 11 / 2011

Transaction ID : C3927249

Amount of Each Receipt this Period

100.00

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 59 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Carla A Miller

Mailing Address 751 Jacobs Mill Pond Rd #814

City State Zip Code
 Elgin SC 29045

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

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3927250

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Carla A Miller

Mailing Address 751 Jacobs Mill Pond Rd #814

City State Zip Code
 Elgin SC 29045

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

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3927251

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Eric J Neal

Mailing Address 1355 Woodside Dr

City State Zip Code
 Arnold MO 63010

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 ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935602

Amount of Each Receipt this Period

300.00

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

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

500.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 60 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Eric J Neal

Mailing Address 1355 Woodside Dr

City State Zip Code
 Arnold MO 63010

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 ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935603

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Eric J Neal

Mailing Address 1355 Woodside Dr

City State Zip Code
 Arnold MO 63010

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 ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935604

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Roger Neal

Mailing Address 1355 Woodside Dr

City State Zip Code
 Arnold MO 63010

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. 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 / 11 / 2011

Transaction ID : C3935605

Amount of Each Receipt this Period

300.00

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

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

900.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 61 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Robert Olson Jr

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

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935610

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. Robert Olson Jr

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

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935611

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

C. Robert Olson Jr

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

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935612

Amount of Each Receipt this Period

400.00

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

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

1200.00

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 62 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Steven Olwin

Mailing Address 26561 W Highland Dr

City State Zip Code
 Channahon IL 60410

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. 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 Y
 04 / 11 / 2011

Transaction ID : C3935613

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. Sheila Peacock

Mailing Address 1810 Buckingham Dr

City State Zip Code
 Pasadena TX 77504-5011

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Intl Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 21 / 2011

Transaction ID : C3675747

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)

C. Sheila Peacock

Mailing Address 1810 Buckingham Dr

City State Zip Code
 Pasadena TX 77504-5011

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Intl Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 18 / 2011

Transaction ID : C3697238

Amount of Each Receipt this Period

38.46

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

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

476.92

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 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Sheila Peacock

Mailing Address 1810 Buckingham Dr

City

Pasadena

State

TX

Zip Code

77504-5011

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Intl Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

03 / 09 / 2011

Transaction ID : C3701944

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)

B. Sheila Peacock

Mailing Address 1810 Buckingham Dr

City

Pasadena

State

TX

Zip Code

77504-5011

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Intl Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

04 / 07 / 2011

Transaction ID : C3827920

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)

C. Sheila Peacock

Mailing Address 1810 Buckingham Dr

City

Pasadena

State

TX

Zip Code

77504-5011

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Intl Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

05 / 09 / 2011

Transaction ID : C3906239

Amount of Each Receipt this Period

38.46

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

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

115.38

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 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Sheila Peacock

Mailing Address 1810 Buckingham Dr

City

Pasadena

State

TX

Zip Code

77504-5011

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPEIU

Occupation

Intl Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 20 / 2011

Transaction ID : C3936840

Amount of Each Receipt this Period

57.69

Full Name (Last, First, Middle Initial)

B. Francisco M Perez

Mailing Address 180 Waterman Ave
Apt 423

City

North Providence

State

RI

Zip Code

02911-4108

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935473

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Francisco M Perez

Mailing Address 180 Waterman Ave
Apt 423

City

North Providence

State

RI

Zip Code

02911-4108

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935475

Amount of Each Receipt this Period

100.00

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

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

257.69

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 65 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Francisco M Perez

Mailing Address 180 Waterman Ave
Apt 423

City State Zip Code
North Providence RI 02911-4108

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935477

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Philip Prata

Mailing Address 43 Van Buren St

City State Zip Code
Newark NJ 07105

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935485

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Philip Prata

Mailing Address 43 Van Buren St

City State Zip Code
Newark NJ 07105

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935486

Amount of Each Receipt this Period

100.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 66 OF 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Philip Prata

Mailing Address 43 Van Buren St

City State Zip Code
 Newark NJ 07105

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935487

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Patricia Priloh

Mailing Address 303 Diamond Ave

City State Zip Code
 Brownsville PA 15417-8645

FEC ID number of contributing federal political committee.

C

Name of Employer

OPEIU

Occupation

Vice President/Int'l Rep.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 18 / 2011

Transaction ID : C3697243

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Scott J Rehberg

Mailing Address 1153 Thistle Ln

City State Zip Code
 Lebanon OH 45036

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935319

Amount of Each Receipt this Period

80.00

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

430.00

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 67 OF 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Scott J Rehberg

Mailing Address 1153 Thistle Ln

City

Lebanon

State

OH

Zip Code

45036

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935321

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

B. Scott J Rehberg

Mailing Address 1153 Thistle Ln

City

Lebanon

State

OH

Zip Code

45036

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935323

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

C. Tamara Rubyn

Mailing Address PO Box 149

City

Carmichael

State

CA

Zip Code

95609-0149

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

President/Business Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 18 / 2011

Transaction ID : C3666847

Amount of Each Receipt this Period

50.00

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

210.00

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 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Tamara Rubyn

Mailing Address PO Box 149

City State Zip Code
 Carmichael CA 95609-0149

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

President/Business Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 24 2011

Transaction ID : C3697061

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Tamara Rubyn

Mailing Address PO Box 149

City State Zip Code
 Carmichael CA 95609-0149

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

President/Business Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 14 2011

Transaction ID : C3701734

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Tamara Rubyn

Mailing Address PO Box 149

City State Zip Code
 Carmichael CA 95609-0149

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

President/Business Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 11 2011

Transaction ID : C3828473

Amount of Each Receipt this Period

50.00

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

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

130.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 112

<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)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Tamara Rubyn

Mailing Address PO Box 149

City

Carmichael

State

CA

Zip Code

95609-0149

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

President/Business Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		2	3		2	0	1	1		

Transaction ID : C3901733

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Tamara Rubyn

Mailing Address PO Box 149

City

Carmichael

State

CA

Zip Code

95609-0149

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

President/Business Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	9		2	0	1	1		

Transaction ID : C3936824

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Paul D Rumbuc

Mailing Address 3570 Magnolia Ct

City

Oakland Township

State

MI

Zip Code

48363

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 ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		1	1		2	0	1	1		

Transaction ID : C3927013

Amount of Each Receipt this Period

400.00

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

490.00

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 70 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Paul D Rumbuc

Mailing Address 3570 Magnolia Ct

City

Oakland Township

State

MI

Zip Code

48363

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 ▼

600.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3927014

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. Paul D Rumbuc

Mailing Address 3570 Magnolia Ct

City

Oakland Township

State

MI

Zip Code

48363

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 ▼

600.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3927015

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

C. Paul Rundlett

Mailing Address 3570 Magnolia Ct

City

Oakland Township

State

MI

Zip Code

48363

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935614

Amount of Each Receipt this Period

400.00

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

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

1200.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 112

<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)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Lloyd Sabrina N

Mailing Address 14 Harbor Hill Rd

City	State	Zip Code
Glen Cove	NY	11542

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Income Life

Occupation

Ins. 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	/	11	/	2011

Transaction ID : C3935623

Amount of Each Receipt this Period

1200.00

Full Name (Last, First, Middle Initial)

B. Patricia Sanchez

Mailing Address PO Box 14841

City	State	Zip Code
Oakland	CA	94614-0841

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Secretary-Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	18	/	2011

Transaction ID : C3666854

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Patricia Sanchez

Mailing Address PO Box 14841

City	State	Zip Code
Oakland	CA	94614-0841

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Secretary-Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2011

Transaction ID : C3697068

Amount of Each Receipt this Period

40.00

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

1290.00

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 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Patricia Sanchez

Mailing Address PO Box 14841

City

Oakland

State

CA

Zip Code

94614-0841

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Secretary-Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 14 / 2011

Transaction ID : C3701736

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Patricia Sanchez

Mailing Address PO Box 14841

City

Oakland

State

CA

Zip Code

94614-0841

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Secretary-Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3828477

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Patricia Sanchez

Mailing Address PO Box 14841

City

Oakland

State

CA

Zip Code

94614-0841

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Secretary-Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2011

Transaction ID : C3901735

Amount of Each Receipt this Period

40.00

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

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

130.00

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 73 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Patricia Sanchez

Mailing Address PO Box 14841

City State Zip Code
 Oakland CA 94614-0841

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Secretary-Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 29 / 2011

Transaction ID : C3936831

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Aaron Sanders

Mailing Address 464 Grand woods Dr

City State Zip Code
 Lansing MI 48917

FEC ID number of contributing
federal political committee.

C

Name of Employer

Local 512

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 18 / 2011

Transaction ID : C3697247

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Robert E Shafer

Mailing Address 102 Rose Garden Ln

City State Zip Code
 Goodlettsville TN 37072

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Income Life

Occupation

Ins. 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 / 11 / 2011

Transaction ID : C3935489

Amount of Each Receipt this Period

100.00

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

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

400.00

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 74 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Robert E Shafer

Mailing Address 102 Rose Garden Ln

City State Zip Code
Goodlettsville TN 37072

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

National Income Life

Ins. 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 / 11 / 2011

Transaction ID : C3935490

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Robert E Shafer

Mailing Address 102 Rose Garden Ln

City State Zip Code
Goodlettsville TN 37072

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

National Income Life

Ins. 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 / 11 / 2011

Transaction ID : C3935491

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Donna Shaffer

Mailing Address 17609 N 8th Ave

City State Zip Code
Phoenix AZ 85023-2604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

OPEIU

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 21 / 2011

Transaction ID : C3675748

Amount of Each Receipt this Period

38.48

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

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

238.48

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 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Donna Shaffer

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

OPEIU

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2011

Transaction ID : C3697239

Amount of Each Receipt this Period

38.48

Full Name (Last, First, Middle Initial)

B. Donna Shaffer

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

OPEIU

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2011

Transaction ID : C3701946

Amount of Each Receipt this Period

38.48

Full Name (Last, First, Middle Initial)

C. Donna Shaffer

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

OPEIU

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 07 / 2011

Transaction ID : C3827921

Amount of Each Receipt this Period

38.48

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

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

115.44

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 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Donna Shaffer

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

OPEIU

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.12

Date of Receipt

05 / 09 / 2011

Transaction ID : C3906241

Amount of Each Receipt this Period

38.48

Full Name (Last, First, Middle Initial)

B. Donna Shaffer

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

OPEIU

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.12

Date of Receipt

06 / 20 / 2011

Transaction ID : C3936841

Amount of Each Receipt this Period

57.72

Full Name (Last, First, Middle Initial)

C. Beth E Snow

Mailing Address 4313 Whitehoof Way

City

Antioch

State

CA

Zip Code

94531

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

242.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935327

Amount of Each Receipt this Period

2.00

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

98.20

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 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Beth E Snow

Mailing Address 4313 Whitehoof Way

City State Zip Code
 Antioch CA 94531

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 ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935329

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

B. Beth E Snow

Mailing Address 4313 Whitehoof Way

City State Zip Code
 Antioch CA 94531

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 ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935331

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

C. Beth E Snow

Mailing Address 4313 Whitehoof Way

City State Zip Code
 Antioch CA 94531

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 ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935333

Amount of Each Receipt this Period

80.00

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

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

240.00

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 78 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Curt D Snow

Mailing Address 827 Buckingham Place

City State Zip Code
 Danville CA 94506

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935337

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

B. Curt D Snow

Mailing Address 827 Buckingham Place

City State Zip Code
 Danville CA 94506

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935339

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

C. Curt D Snow

Mailing Address 827 Buckingham Place

City State Zip Code
 Danville CA 94506

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935341

Amount of Each Receipt this Period

80.00

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

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

240.00

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

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

FOR LINE NUMBER: PAGE 79 OF 112
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Scott E Sonnenberg

Mailing Address 236 Leaf Ln

City State Zip Code
 Alabaster AL 35007

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935494

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Scott E Sonnenberg

Mailing Address 236 Leaf Ln

City State Zip Code
 Alabaster AL 35007

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935495

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Scott E Sonnenberg

Mailing Address 236 Leaf Ln

City State Zip Code
 Alabaster AL 35007

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935496

Amount of Each Receipt this Period

100.00

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 80 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Ryan J Stenglein

Mailing Address 12631 E Imperial Hwy Ste F132

City State Zip Code
 Santa Fe Springs CA 90670

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income life Ins.

Occupation

Ins. 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 / 11 / 2011

Transaction ID : C3935498

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Ryan J Stenglein

Mailing Address 12631 E Imperial Hwy Ste F132

City State Zip Code
 Santa Fe Springs CA 90670

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income life Ins.

Occupation

Ins. 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 / 11 / 2011

Transaction ID : C3935500

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Ryan J Stenglein

Mailing Address 12631 E Imperial Hwy Ste F132

City State Zip Code
 Santa Fe Springs CA 90670

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income life Ins.

Occupation

Ins. 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 / 11 / 2011

Transaction ID : C3935502

Amount of Each Receipt this Period

100.00

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 81 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Christopher Stephens

Mailing Address 1466 Santa Teresa Dr

City

Pittsburg

State

CA

Zip Code

94565

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3927215

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

B. Christopher Stephens

Mailing Address 1466 Santa Teresa Dr

City

Pittsburg

State

CA

Zip Code

94565

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3927217

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

C. Christopher Stephens

Mailing Address 1466 Santa Teresa Dr

City

Pittsburg

State

CA

Zip Code

94565

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3927219

Amount of Each Receipt this Period

80.00

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

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

240.00

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 82 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. James M Surace

Mailing Address 12301 Ridge Rd

City

Cleveland

State

OH

Zip Code

44133

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 ▼

424.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3927395

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

B. James M Surace

Mailing Address 12301 Ridge Rd

City

Cleveland

State

OH

Zip Code

44133

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 ▼

424.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3927397

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

C. James M Surace

Mailing Address 12301 Ridge Rd

City

Cleveland

State

OH

Zip Code

44133

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 ▼

424.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3927399

Amount of Each Receipt this Period

416.00

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: PAGE 83 OF 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. John Surprenant

Mailing Address 12301 Ridge Rd

City

Cleveland

State

OH

Zip Code

44133

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935619

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

B. Randy E Teyssier

Mailing Address 2716 Nw 171St St

City

Edmond

State

OK

Zip Code

73012

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935567

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

c. Randy E Teyssier

Mailing Address 2716 Nw 171St St

City

Edmond

State

OK

Zip Code

73012

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935569

Amount of Each Receipt this Period

200.00

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

816.00

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 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Randy E Teyssier

Mailing Address 2716 Nw 171St St

City State Zip Code
Edmond OK 73012

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Income Life Ins.

Occupation
Ins. 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 Y
04 / 11 / 2011

Transaction ID : C3935571

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Jeffery Thiel

Mailing Address 1125 Charter Oak Pkwy

City State Zip Code
Creve Coeur MO 63146

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Income Life Ins.

Occupation
Ins. 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 / 11 / 2011

Transaction ID : C3935508

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Jeffery Thiel

Mailing Address 1125 Charter Oak Pkwy

City State Zip Code
Creve Coeur MO 63146

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Income Life Ins.

Occupation
Ins. 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 / 11 / 2011

Transaction ID : C3935509

Amount of Each Receipt this Period

100.00

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

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

400.00

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 85 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Jeffery Thiel

Mailing Address 1125 Charter Oak Pkwy

City State Zip Code
 Creve Coeur MO 63146

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Ins. 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 / 11 / 2011

Transaction ID : C3935510

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Becky Turner

Mailing Address 704 Royal View Ct

City State Zip Code
 Weatherford TX 76086

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCAL 277

Occupation

President/Business Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 18 / 2011

Transaction ID : C3697249

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dustin W Venekamp

Mailing Address 1004 Division St #301

City State Zip Code
 Billings MT 59101

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935512

Amount of Each Receipt this Period

100.00

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

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

450.00

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

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

FOR LINE NUMBER: PAGE 86 OF 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Dustin W Venekamp

Mailing Address 1004 Division St #301

City

Billings

State

MT

Zip Code

59101

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935513

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Dustin W Venekamp

Mailing Address 1004 Division St #301

City

Billings

State

MT

Zip Code

59101

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3935514

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Rodney E Ward

Mailing Address 18944 Emit Rd

City

Brownstown

State

MI

Zip Code

48192

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 11 / 2011

Transaction ID : C3927004

Amount of Each Receipt this Period

100.00

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 87 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Rodney E Ward

Mailing Address 18944 Emit Rd

City

Brownstown

State

MI

Zip Code

48192

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

04 / 11 / 2011

Transaction ID : C3927005

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Rodney E Ward

Mailing Address 18944 Emit Rd

City

Brownstown

State

MI

Zip Code

48192

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

04 / 11 / 2011

Transaction ID : C3927006

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Jacqueline K White-Brown

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

OPEIU LOCAL 537

Occupation

Sec.Treas./Bus. Mgr.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

01 / 31 / 2011

Transaction ID : C3674918

Amount of Each Receipt this Period

40.00

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

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

240.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 88 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Jacqueline K White-Brown

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

OPEIU LOCAL 537

Occupation

Sec.Treas./Bus. Mgr.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2011

Transaction ID : C3697102

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Jacqueline K White-Brown

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

OPEIU LOCAL 537

Occupation

Sec.Treas./Bus. Mgr.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 04 / 2011

Transaction ID : C3827838

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Jacqueline K White-Brown

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

OPEIU LOCAL 537

Occupation

Sec.Treas./Bus. Mgr.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2011

Transaction ID : C3906268

Amount of Each Receipt this Period

60.00

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

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

150.00

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 89 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Jacqueline K White-Brown

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

OPEIU LOCAL 537

Occupation

Sec.Treas./Bus. Mgr.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

06 / 06 / 2011

Transaction ID : C3938775

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Robe Whittinghill

Mailing Address 5703 Oberlin Dr Suite 106

City

San Diego

State

CA

Zip Code

92121

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 ▼

450.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935542

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Robe Whittinghill

Mailing Address 5703 Oberlin Dr Suite 106

City

San Diego

State

CA

Zip Code

92121

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 ▼

450.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935544

Amount of Each Receipt this Period

150.00

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

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

340.00

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 90 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Robe Whittinghill

Mailing Address 5703 Oberlin Dr Suite 106

City State Zip Code
 San Diego CA 92121

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 ▼

450.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935546

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Cynthia J Wilhelmi

Mailing Address 2912 S Louise Ave #105

City State Zip Code
 Sioux Falls SD 57106

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 ▼

300.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935517

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Cynthia J Wilhelmi

Mailing Address 2912 S Louise Ave #105

City State Zip Code
 Sioux Falls SD 57106

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 ▼

300.00

Date of Receipt

04 / 11 / 2011

Transaction ID : C3935518

Amount of Each Receipt this Period

100.00

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

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

350.00

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 91 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Cynthia J Wilhelmi

Mailing Address 2912 S Louise Ave #105

City State Zip Code
 Sioux Falls SD 57106

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : C3935519

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Tom Williams

Mailing Address 300 S Pine Island Rd Ste 308

City State Zip Code
 Plantation FL 33324

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 Y
 04 / 11 / 2011

Transaction ID : C3935575

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Tom Williams

Mailing Address 300 S Pine Island Rd Ste 308

City State Zip Code
 Plantation FL 33324

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 Y
 04 / 11 / 2011

Transaction ID : C3935576

Amount of Each Receipt this Period

200.00

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

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

500.00

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 92 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Tom Williams

Mailing Address 300 S Pine Island Rd Ste 308

City State Zip Code
 Plantation FL 33324

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 Y
 04 / 11 / 2011

Transaction ID : C3935577

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. David S Zophin

Mailing Address 300 S Pine Island Rd Ste 308

City State Zip Code
 Plantation FL 33324

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 Y
 04 / 11 / 2011

Transaction ID : C3935579

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

c. David S Zophin

Mailing Address 300 S Pine Island Rd Ste 308

City State Zip Code
 Plantation FL 33324

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 Y
 04 / 11 / 2011

Transaction ID : C3935580

Amount of Each Receipt this Period

200.00

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

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

600.00

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 93 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. David S Zophin

Mailing Address 300 S Pine Island Rd Ste 308

City State Zip Code
 Plantation FL 33324

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 Y
 04 / 11 / 2011

Transaction ID : C3935581

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

200.00

42367.09

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 112

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Capitol One Bank

Mailing Address PO Box 1296

City State Zip Code
 Laurel MD 20707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 21 / 2011

Transaction ID : C3675912

Amount of Each Receipt this Period

51.15

Full Name (Last, First, Middle Initial)

B. Capitol One Bank

Mailing Address PO Box 1296

City State Zip Code
 Laurel MD 20707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2011

Transaction ID : C3878777

Amount of Each Receipt this Period

188.84

Full Name (Last, First, Middle Initial)

C. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 31 / 2011

Transaction ID : C3675911

Amount of Each Receipt this Period

30.50

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

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

270.49

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

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

FOR LINE NUMBER: PAGE 95 OF 112
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

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 State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 28 2011

Transaction ID : C3878775

Amount of Each Receipt this Period

34.36

Full Name (Last, First, Middle Initial)

B. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 31 2011

Transaction ID : C3887520

Amount of Each Receipt this Period

32.82

Full Name (Last, First, Middle Initial)

C. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 30 2011

Transaction ID : C3914640

Amount of Each Receipt this Period

35.20

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

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

102.38

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 112

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

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 State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2011

Transaction ID : C3914641

Amount of Each Receipt this Period

32.82

Full Name (Last, First, Middle Initial)

B. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2011

Transaction ID : C3940857

Amount of Each Receipt this Period

30.24

Full Name (Last, First, Middle Initial)

C. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2011

Transaction ID : C3940878

Amount of Each Receipt this Period

5.32

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

68.38

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 112

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

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 State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2011

Transaction ID : C3941016

Amount of Each Receipt this Period

6.32

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

6.32

447.57

<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

OPEIU JB Moss Voice of the Electorate (VOTE)

The image shows three 16-pin D-sub connectors. The first connector is labeled '06' and has two pins labeled 'M'. The second connector is labeled '20' and has two pins labeled 'D'. The third connector is labeled '2011' and has four pins labeled 'Y'. Each connector has a 16-pin D-sub footprint with pins arranged in two rows of eight.

3000.00

3000.00

3000.00

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

OPEIU JB Moss Voice of the Electorate (VOTE)

-5000.00

MM / DD / YYYY

5000.00

5000.00

State: NV District: 01

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 100 OF 112

<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. Democratic Congressional Campaign

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	02	/	2011

Mailing Address 430 S Capitol St SE

City	State	Zip Code
Washington	DC	20003-4024

Purpose of Disbursement
2011 Membership Contribution

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2011

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: 2011 Membership Cont

Transaction ID : D564

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

B. Democratic Senatorial Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	02	/	2011

Mailing Address 120 Maryland Avenue, NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
2011 Membership Contribution

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2011

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District: 2011 Membership Cont

Transaction ID : D243843

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SHERROD BROWN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2011

Mailing Address 2280 KRESGE DRIVE
Suite 800

City	State	Zip Code
AMHERST	OH	44001

Purpose of Disbursement
US Senate, OH

011

Candidate Name

Category/
Type**Sherrod Brown**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: OH District: 00

Transaction ID : D156

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

31000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 101 OF 112

<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. Jerry McNerney

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2011

Mailing Address 6520 Village Parkway
2nd Floor

City Dublin State CA Zip Code 94568

Purpose of Disbursement
CA - 11 General

011

Transaction ID : D242851

Amount of Each Disbursement this Period

2000.00

Candidate Name

Jerry McNerneyCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 11

Full Name (Last, First, Middle Initial)

B. Kathy Hochul for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2011

Mailing Address 4521 Copperfield Drive

City Hamburg State NY Zip Code 14075

Purpose of Disbursement
NY 26 Primary

011

Transaction ID : D243224

Amount of Each Disbursement this Period

1000.00

Candidate Name

Kathy HochulCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 26

Full Name (Last, First, Middle Initial)

C. Mark DeSaulnier

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2011

Mailing Address PO Box 6066

City Concord State CA Zip Code 94524

Purpose of Disbursement
State Senate - CA

011

Transaction ID : D535

Amount of Each Disbursement this Period

1500.00

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2011
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 102 OF 112

<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. Martha Coakley

Mailing Address 529 Main Street

City	State	Zip Code
Charlestown	MA	02129

Purpose of Disbursement
The Martha Coakley for Senate Committee

Candidate Name

Martha CoakleyOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2011

Transaction ID : D238951

Amount of Each Disbursement this Period

-5000.00

Full Name (Last, First, Middle Initial)

B. Nick Rahall

Mailing Address P O BOX 64

City	State	Zip Code
BECKLEY	WV	25802

Purpose of Disbursement
3rd District - WV

Candidate Name

NICK JOE II RAHALLOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2011

Transaction ID : D242864

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. STEVE ROTHMAN FOR NEW JERSEY INC.

Mailing Address P.O. Box 714

City	State	Zip Code
Hackensack	NJ	07602

Purpose of Disbursement
Congress 9th District-NJ

Candidate Name

Steve RothmanOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2011
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	01	/	2011

Transaction ID : D238945

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 103 OF 112

<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. Tim Bishop For Congress

Mailing Address PO Box 437

City	State	Zip Code
Farmingville	NY	11738

Purpose of Disbursement
House of Representatives NY (1)

Candidate Name

Tim BishopOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2011

Transaction ID : D244102

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Van Hollen For Congress

Mailing Address 10605 Concord St

City	State	Zip Code
Kensington	MD	20895-2504

Purpose of Disbursement
MD 8 General

Candidate Name

Chris Van HollenOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2011

Transaction ID : D223618

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Van Hollen For Congress

Mailing Address 10605 Concord St

City	State	Zip Code
Kensington	MD	20895-2504

Purpose of Disbursement
MD 8 General

Candidate Name

Chris Van HollenOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2011

Transaction ID : D232613

Amount of Each Disbursement this Period

-1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

43000.00

	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

OPEIU JB Moss Voice of the Electorate (VOTE)

A. Rick ALTIG Jr

Mailing Address 15440 Bel-Red Rd

City	State	Zip Code
Redmond	WA	98052

Purpose of Disbursement	Donor Refund 2010 Cycle

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District: Donor Refund 2010 Cy

Date of Disbursement

Transaction ID : D232618

Amount of Each Disbursement this Period

824.00

Full Name (Last, First, Middle Initial)

B. Eric Giglione

Mailing Address 38 Windsor Ln

City	State	Zip Code
Little Silver	NJ	07739

Purpose of Disbursement	Donor Refund 2010 Cycle

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Date of Disbursement

MM / DD / YYYY

Transaction ID : D232614

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. Durhon Renah R Oldham

Mailing Address 1995 Harris Rd

City	State	Zip Code
Penfield	NY	14526

Purpose of Disbursement	Donor Refund 2010 Cycle

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District: Donor Refund 2010 Cy

Date of Disbursement

Transaction ID : D232616

Amount of Each Disbursement this Period

600.00

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

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

2024.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 105 OF 112

<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 checked="" 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. Robert Olson Jr

Mailing Address 26561 W Highland Dr

City	State	Zip Code
Channahon	IL	60410

Purpose of Disbursement
Donor Refund 2010 Cycle

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010

☐ Primary ☐ General☒ Other (specify) ▼

Donor Refund 2010 Cy

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2011

Transaction ID : D232619

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. Paul D Rumbuc

Mailing Address 3570 Magnolia Ct

City	State	Zip Code
Oakland Township	MI	48363

Purpose of Disbursement
Donor Refund 2010 Cycle

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

☐ Primary ☐ General☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2011

Transaction ID : D232615

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. James M Surace

Mailing Address 12301 Ridge Rd

City	State	Zip Code
Cleveland	OH	44133

Purpose of Disbursement
Donor Refund 2010 Cycle

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

☐ Primary ☐ General☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2011

Transaction ID : D232617

Amount of Each Disbursement this Period

824.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2024.00

4048.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 108 OF 112

<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)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. CITIBANK, F.S.B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2011

Mailing Address 1101 Pennsylvania Avenue, N.W.

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Service Charge-NY

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Transaction ID : D245875

Amount of Each Disbursement this Period

19.00

Full Name (Last, First, Middle Initial)

B. CITIBANK, F.S.B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Mailing Address 1101 Pennsylvania Avenue, N.W.

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
ACH Debit - JB MOSS VOTE ACCOUNT

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Transaction ID : D245877

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. CITIBANK, F.S.B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2011

Mailing Address 1101 Pennsylvania Avenue, N.W.

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
ACH Debit - JB MOSS VOTE ACCOUNT

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Transaction ID : D245878

Amount of Each Disbursement this Period

25.95

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.95

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 109 OF 112

<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)

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	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Service Charge-NY

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		10		2011

Transaction ID : D232607

Amount of Each Disbursement this Period

19.00

Full Name (Last, First, Middle Initial)

B. CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
ACH Debit - JB MOSS VOTE ACCOUNT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2011

Transaction ID : D232609

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Clint Zweifel

Mailing Address 2781 Red Cedar Parc Drive, 5

City	State	Zip Code
O'Fallon	MO	63368

Purpose of Disbursement
MO - Treasurer

Candidate Name

Clint Zweifel

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: MO District:

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2011

Transaction ID : D242866

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2539.00

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	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

OPEIU JB Moss Voice of the Electorate (VOTE)

011

Category/
Type☒ Primary ☐ General
☐ Other (specify) ▼

04 / 01 / 2011

011

Category/
Type☒ Primary ☐ General
☐ Other (specify) ▼

011

Category/
Type

☒ Primary ☐ General
☐ Other (specify) ▼

750.00

FEC Schedule B (Form 3X) Rev. 02/2003

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 111 OF 112

<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)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Ken Donnelly

Mailing Address 12 Grandview Road

City	State	Zip Code
Arlington	MA	02476

Purpose of Disbursement
MA-State Senator

Candidate Name

Ken DonnellyOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2011

Transaction ID : D232604

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. Martin Walsh

Mailing Address 138 West Third Street

City	State	Zip Code
South Boston	MA	02127

Purpose of Disbursement
MA-State Representative

Candidate Name

Martin WalshOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2011

Transaction ID : D263143

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. The Committee to Elect Brian A. Joyce

Mailing Address 776 R Washington Street

City	State	Zip Code
Canton	MA	02021

Purpose of Disbursement
Senator - MA

Candidate Name

Brian JoyceOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2011

☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2011

Transaction ID : D245882

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

700.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 112 OF 112

<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)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Murray Terry

Mailing Address PO Box 1803

City Plymouth	State MA	Zip Code 02362
------------------	-------------	-------------------

Purpose of Disbursement
State Senator Statewide - MA

Candidate Name

Terry MurrayOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2011

☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2011

Transaction ID : D238950

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. The Murphy Committee

Mailing Address P.O.Box 702

City Burlington	State MA	Zip Code 01803
--------------------	-------------	-------------------

Purpose of Disbursement
State Representative MA

Candidate Name

Charles MurphyOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2011

☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2011

Transaction ID : D233051

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

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

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00

-4016.10
