

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 07 01 2007 through 12 31 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Nancy Wohlforth Signature of Treasurer Electronically Filed by Nancy Wohlforth Date 01 25 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		327657.33
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	327657.33									
(c) Total Receipts (from Line 19)	152072.62	228798.86								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	479729.95	556456.19								
7. Total Disbursements (from Line 31)	40303.78	57879.53								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	439426.17	498576.66								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

Office and Professional Employees International Union - Voice of the Electorate

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	93860.00	224892.75
(i) Itemized (use Schedule A)	58212.62	207789.75
(ii) Unitemized	152072.62	227147.34
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	152072.62	227147.34
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	1000.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	651.52
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	152072.62	228798.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	152072.62	228798.86

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) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	28250.00	31325.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	28250.00	31325.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	21500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	-446.22	-446.22
(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))	-446.22	-446.22
29. Other Disbursements.....	2500.00	5500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	40303.78	57879.53
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	40303.78	57879.53

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	152072.62	227147.34
34. Total Contribution Refunds (from Line 28(d))	-446.22	-446.22
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	152518.84	227593.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	28250.00	31325.75
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	1000.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	28250.00	30325.75

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.	Full Name (Last, First, Middle Initial) John R Akers	Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 712 S HWS Cleveland Blvd	Transaction ID: C108171
	City State Zip Code Elkhorn NE 68022	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) John R Akers	Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 712 S HWS Cleveland Blvd	Transaction ID: C113959
	City State Zip Code Elkhorn NE 68022	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Walter Allen	Date of Receipt MM / DD / YYYY 07 / 03 / 2007
	Mailing Address 7419 Cuvier St	Transaction ID: C106251
	City State Zip Code La Jolla CA 92037	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer OPEIU, LOCAL NO.30 Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional)	725.00
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 7 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Walter Allen		Date of Receipt MM / DD / YYYY 07 / 17 / 2007		
	Mailing Address 7419 Cuvier St		Transaction ID: C106437		
	City La Jolla	State CA	Zip Code 92037	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer OPEIU, LOCAL NO.30	Occupation Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00			

B.	Full Name (Last, First, Middle Initial) Walter Allen		Date of Receipt MM / DD / YYYY 08 / 15 / 2007		
	Mailing Address 7419 Cuvier St		Transaction ID: C108626		
	City La Jolla	State CA	Zip Code 92037	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer OPEIU, LOCAL NO.30	Occupation Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00			

C.	Full Name (Last, First, Middle Initial) Walter Allen		Date of Receipt MM / DD / YYYY 09 / 28 / 2007		
	Mailing Address 7419 Cuvier St		Transaction ID: C113480		
	City La Jolla	State CA	Zip Code 92037	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer OPEIU, LOCAL NO.30	Occupation Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00			

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Walter Allen		Date of Receipt
	Mailing Address 7419 Cuvier St		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	La Jolla	CA	92037
	FEC ID number of contributing federal political committee. C		Transaction ID: C115962
Name of Employer OPEIU, LOCAL NO.30		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="360.00"/>	<input type="text" value="40.00"/>

B.	Full Name (Last, First, Middle Initial) Walter Allen		Date of Receipt
	Mailing Address 7419 Cuvier St		<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	La Jolla	CA	92037
	FEC ID number of contributing federal political committee. C		Transaction ID: C118022
Name of Employer OPEIU, LOCAL NO.30		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="360.00"/>	<input type="text" value="50.00"/>

C.	Full Name (Last, First, Middle Initial) Walter Allen		Date of Receipt
	Mailing Address 7419 Cuvier St		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	La Jolla	CA	92037
	FEC ID number of contributing federal political committee. C		Transaction ID: C120936
Name of Employer OPEIU, LOCAL NO.30		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="360.00"/>	<input type="text" value="40.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="130.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 96
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Office and Professional Employees International Union - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)
Richard Altig, Jr

Mailing Address 13911 49TH AVENUE CT NW

City State Zip Code
GIG HARBOR WA 98332

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 ▼ 4140.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2007

Transaction ID: C107060

Amount of Each Receipt this Period
1242.00

B.

Full Name (Last, First, Middle Initial)
Richard Altig, Jr

Mailing Address 13911 49TH AVENUE CT NW

City State Zip Code
GIG HARBOR WA 98332

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 ▼ 4140.00

Date of Receipt
MM / DD / YYYY
10 / 10 / 2007

Transaction ID: C114343

Amount of Each Receipt this Period
1656.00

C.

Full Name (Last, First, Middle Initial)
RICK ALTIG Jr

Mailing Address 10025 111th AVE NE

City State Zip Code
KIRKLAND WA 98033

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 ▼ 4160.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2007

Transaction ID: C106978

Amount of Each Receipt this Period
1248.00

SUBTOTAL of Receipts This Page (optional) ► **4146.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
RICK ALTIG Jr

Mailing Address 10025 111th AVE NE

City State Zip Code
KIRKLAND WA 98033

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 ▼ 4160.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C114344

Amount of Each Receipt this Period

1664.00

B.

Full Name (Last, First, Middle Initial)
Daniel J Arreola

Mailing Address 13455 VILLAGE PARK DR APT B6

City State Zip Code
SOUTHGATE MI 48195

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

Name of Employer Occupation
American Income Life Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: C107053

Amount of Each Receipt this Period

120.00

C.

Full Name (Last, First, Middle Initial)
Daniel J Arreola

Mailing Address 13455 VILLAGE PARK DR APT B6

City State Zip Code
SOUTHGATE MI 48195

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

Name of Employer Occupation
American Income Life Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113871

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)

1904.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) WESLEY BANGS		Date of Receipt
	Mailing Address 9500 OSUNA RD NE #626		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 15 / 2007
	City	State	Zip Code
	ALBUQUERQUE	NM	87111
	FEC ID number of contributing federal political committee. C		Transaction ID: C107655
Name of Employer American Income Life		Occupation Insurance Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	150.00

B.	Full Name (Last, First, Middle Initial) Lorena Barriere		Date of Receipt
	Mailing Address 10522 KIBBEE AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 15 / 2007
	City	State	Zip Code
	WHITTIER	CA	90603
	FEC ID number of contributing federal political committee. C		Transaction ID: C107078
Name of Employer American Income Life		Occupation Insurance Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	75.00

C.	Full Name (Last, First, Middle Initial) Lorena Barriere		Date of Receipt
	Mailing Address 10522 KIBBEE AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 10 / 2007
	City	State	Zip Code
	WHITTIER	CA	90603
	FEC ID number of contributing federal political committee. C		Transaction ID: C114462
Name of Employer American Income Life		Occupation Insurance Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	100.00

SUBTOTAL of Receipts This Page (optional)	▶	325.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
Yaroslav Bitman

Mailing Address 223 WATERFORD PARK LN

City State Zip Code
RALEIGH NC 27615

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 ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: C107191

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
Yaroslav Bitman

Mailing Address 223 WATERFORD PARK LN

City State Zip Code
RALEIGH NC 27615

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 ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 10 / 2007

Transaction ID: C113944

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)
Lisa Blake

Mailing Address 30445 Fox Club Drive

City State Zip Code
Farmington Hills MI 48331-1953

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

Name of Employer Occupation
OPEIU Local 42 President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 282.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2007

Transaction ID: C106448

Amount of Each Receipt this Period

24.00

SUBTOTAL of Receipts This Page (optional)

724.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Lisa Blake		Date of Receipt MM / DD / YYYY 08 / 24 / 2007		
	Mailing Address 30445 Fox Club Drive		Transaction ID: C106908		
	City Farmington Hills	State MI	Zip Code 48331-1953	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer OPEIU Local 42	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 282.00			

B.	Full Name (Last, First, Middle Initial) Lisa Blake		Date of Receipt MM / DD / YYYY 09 / 20 / 2007		
	Mailing Address 30445 Fox Club Drive		Transaction ID: C109148		
	City Farmington Hills	State MI	Zip Code 48331-1953	Amount of Each Receipt this Period 24.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer OPEIU Local 42	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 282.00			

C.	Full Name (Last, First, Middle Initial) Lisa Blake		Date of Receipt MM / DD / YYYY 10 / 25 / 2007		
	Mailing Address 30445 Fox Club Drive		Transaction ID: C115603		
	City Farmington Hills	State MI	Zip Code 48331-1953	Amount of Each Receipt this Period 24.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer OPEIU Local 42	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 282.00			

SUBTOTAL of Receipts This Page (optional)	▶	78.00
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 14 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Lisa Blake

Mailing Address 30445 Fox Club Drive

City Farmington Hills State MI Zip Code 48331-1953

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

Name of Employer OPEIU Local 42 Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 282.00

Date of Receipt: 11 / 09 / 2007
Transaction ID: C117941
 Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial)
Lisa Blake

Mailing Address 30445 Fox Club Drive

City Farmington Hills State MI Zip Code 48331-1953

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

Name of Employer OPEIU Local 42 Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 282.00

Date of Receipt: 12 / 13 / 2007
Transaction ID: C118960
 Amount of Each Receipt this Period: 24.00

C. Full Name (Last, First, Middle Initial)
Gary Bleier

Mailing Address 917A WINDFIELD PL

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 ▼ 1000.00

Date of Receipt: 08 / 15 / 2007
Transaction ID: C107645
 Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ► 354.00

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 15 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Gary Bleier		Date of Receipt MM / DD / YYYY 10 / 10 / 2007		
	Mailing Address 917A WINDFIELD PL		Transaction ID: C114362		
	City APPLETON	State WI	Zip Code 54911	Amount of Each Receipt this Period 400.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Insurance Agent	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
1000.00

B.	Full Name (Last, First, Middle Initial) Mark Bleier		Date of Receipt MM / DD / YYYY 08 / 15 / 2007		
	Mailing Address 4325 N WINDING BROOK RD		Transaction ID: C107386		
	City APPLETON	State WI	Zip Code 54914	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Insurance Agent	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
250.00

C.	Full Name (Last, First, Middle Initial) Mark Bleier		Date of Receipt MM / DD / YYYY 10 / 10 / 2007		
	Mailing Address 4325 N WINDING BROOK RD		Transaction ID: C114361		
	City APPLETON	State WI	Zip Code 54914	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Insurance Agent	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
250.00

SUBTOTAL of Receipts This Page (optional)	▶	575.00
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 16 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.	Full Name (Last, First, Middle Initial) Brandon L Braun	Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 1981 TWILIGHT HILLS CT	Transaction ID: C107147
	City State Zip Code COMMERCE MI 48390	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer american income life Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) Brandon L Braun	Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 1981 TWILIGHT HILLS CT	Transaction ID: C113872
	City State Zip Code COMMERCE MI 48390	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer american income life Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Linda Bridges	Date of Receipt MM / DD / YYYY 07 / 11 / 2007
	Mailing Address 6940 N Fairfax Dr #200	Transaction ID: C106342
	City State Zip Code Arlington VA 22213	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Local 2 Occupation 1st Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	780.00
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 17 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
David W Brister

Mailing Address 105 WILLOW OAK LN

City State Zip Code
MULLICAN HILLS NJ 08062

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

Name of Employer American Income Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 15 / 2007

Transaction ID: C107002

Amount of Each Receipt this Period
120.00

B. Full Name (Last, First, Middle Initial)
David W Brister

Mailing Address 105 WILLOW OAK LN

City State Zip Code
MULLICAN HILLS NJ 08062

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

Name of Employer American Income Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 10 / 2007

Transaction ID: C113984

Amount of Each Receipt this Period
160.00

C. Full Name (Last, First, Middle Initial)
Tod Brown

Mailing Address 7802 CANFORD ST
Apt H

City State Zip Code
CAMBY IN 46113

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

Name of Employer American Income Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 15 / 2007

Transaction ID: C107579

Amount of Each Receipt this Period
150.00

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 18 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
Tod Brown

Mailing Address 7802 CANFORD ST
Apt H

City State Zip Code
CAMBY IN 46113

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 ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113794

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
David Cohen

Mailing Address 140 N LAS PALMOS

City State Zip Code
Los Angeles CA 90004

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 ▼ 3750.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: C107063

Amount of Each Receipt this Period

1200.00

C.

Full Name (Last, First, Middle Initial)
David Cohen

Mailing Address 140 N LAS PALMOS

City State Zip Code
Los Angeles CA 90004

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 ▼ 3750.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113664

Amount of Each Receipt this Period

1350.00

SUBTOTAL of Receipts This Page (optional)

2750.00

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 19 / 96
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial) Melanie A COHEN		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 1640 WORCESTER RD #109D		Transaction ID: C107107
City FRAMINGHAM	State Zip Code MA 01701	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90.00
Name of Employer american income life	Occupation Agent	Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Melanie A COHEN		Date of Receipt MM / DD / YYYY 10 / 10 / 2007
Mailing Address 1640 WORCESTER RD #109D		Transaction ID: C113823
City FRAMINGHAM	State Zip Code MA 01701	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer american income life	Occupation Agent	Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Micah A. COHEN		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 140 N LAS PALMAS		Transaction ID: C107062
City LOS ANGELES	State Zip Code CA 90004	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer American Income Life	Occupation Insurance Agent	Aggregate Year-to-Date ▼ 330.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	270.00
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 20 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 140 N LAS PALMAS

City State Zip Code
LOS ANGELES CA 90004

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

Name of Employer American Income Life Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
10 / 10 / 2007

Transaction ID: C113659

Amount of Each Receipt this Period
210.00

B. Full Name (Last, First, Middle Initial)
TYRONE ALLEN CONARD

Mailing Address 15581 ANDOVER HEIGHTS DR

City State Zip Code
WOODBIDGE VA 22193

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 ▼ 1000.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2007

Transaction ID: C107095

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
TYRONE ALLEN CONARD

Mailing Address 15581 ANDOVER HEIGHTS DR

City State Zip Code
WOODBIDGE VA 22193

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 ▼ 1000.00

Date of Receipt
MM / DD / YYYY
10 / 10 / 2007

Transaction ID: C114323

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ▶ 910.00

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 21 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)

John F Conley

Mailing Address 10 Brannen Dr

City State Zip Code
Savannah GA 31410-1402

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

Name of Employer Occupation
OPEIU Local 4873 President

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

Date of Receipt

M M / D D / Y Y Y Y
07 / 12 / 2007

Transaction ID: C106409

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)

Demario M Cooper

Mailing Address 724 Royal Anne Ln #105

City State Zip Code
Raleigh NC 27615

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

Name of Employer Occupation
American Income Life Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4000.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: C108170

Amount of Each Receipt this Period
1200.00

C.

Full Name (Last, First, Middle Initial)

Demario M Cooper

Mailing Address 724 Royal Anne Ln #105

City State Zip Code
Raleigh NC 27615

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

Name of Employer Occupation
American Income Life Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 10 / 2007

Transaction ID: C113946

Amount of Each Receipt this Period
1600.00

SUBTOTAL of Receipts This Page (optional) ▶

3300.00

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 22 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) BRANDON CORKINS		Date of Receipt
	Mailing Address 5366 OAK RD		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	DAVISON	MI	48423
	FEC ID number of contributing federal political committee. C		Transaction ID: C107459
Name of Employer American Income Life		Occupation Insurance Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	<input type="text" value="120.00"/>

B.	Full Name (Last, First, Middle Initial) BRANDON CORKINS		Date of Receipt
	Mailing Address 5366 OAK RD		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	DAVISON	MI	48423
	FEC ID number of contributing federal political committee. C		Transaction ID: C113873
Name of Employer American Income Life		Occupation Insurance Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	<input type="text" value="160.00"/>

C.	Full Name (Last, First, Middle Initial) John Derosier, II		Date of Receipt
	Mailing Address 2796 RIDGECREST		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	MARIETTA	GA	30907
	FEC ID number of contributing federal political committee. C		Transaction ID: C107254
Name of Employer American Income Life		Occupation Insurance Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input type="text" value="75.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="355.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 23 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
John Derosier, II

Mailing Address 2796 RIDGECREST

City State Zip Code
MARIETTA GA 30907

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
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113727

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Eddie S Dhillon

Mailing Address 7740 HERITAGE DR #11

City State Zip Code
Lansing MI 48917

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 ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: C108268

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Eddie S Dhillon

Mailing Address 7740 HERITAGE DR #11

City State Zip Code
Lansing MI 48917

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 ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113877

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► 800.00

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 24 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Jason P Dickson
Mailing Address 639 PARKRIDGE LN
City CORAOPOLIS State PA Zip Code 15108
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 08 / 15 / 2007
Transaction ID: C107526
Amount of Each Receipt this Period 75.00

B. Full Name (Last, First, Middle Initial)
Jason P Dickson
Mailing Address 639 PARKRIDGE LN
City CORAOPOLIS State PA Zip Code 15108
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 10 / 10 / 2007
Transaction ID: C114162
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Jose Diecedue, III
Mailing Address 7712 JEFFERSON PL BLVD APTC
City BATON ROUGE State LA Zip Code 70809
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 ▼ 1000.00
Date of Receipt 08 / 15 / 2007
Transaction ID: C107576
Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 475.00
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 25 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)

Jose Diecedue, III

Mailing Address 7712 JEFFERSON PL BLVD APTC

City State Zip Code
BATON ROUGE LA 70809

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

Name of Employer Occupation
American Income Life Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113819

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

DEISLAVA DIMITROVA

Mailing Address 10925 Spaulding Plz

City State Zip Code
OMAHA NE 68164

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 ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: C108218

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

DEISLAVA DIMITROVA

Mailing Address 10925 Spaulding Plz

City State Zip Code
OMAHA NE 68164

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 ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113958

Amount of Each Receipt this Period

200.00

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: PAGE 26 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Jeffrey Dinocento
Mailing Address 1911 LANDAU LN
City BOSSIER CITY State LA Zip Code 71111
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 ▼ 300.00
Date of Receipt 08 / 15 / 2007
Transaction ID: C107137
Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Jeffrey Dinocento
Mailing Address 1911 LANDAU LN
City BOSSIER CITY State LA Zip Code 71111
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 ▼ 300.00
Date of Receipt 10 / 10 / 2007
Transaction ID: C113815
Amount of Each Receipt this Period -100.00

C. Full Name (Last, First, Middle Initial)
Mary Dunn
Mailing Address 9333 SW 22 st
City Oklahoma City State OK Zip Code 73128
FEC ID number of contributing federal political committee. **C**
Name of Employer International Union UAW Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt 07 / 30 / 2007
Transaction ID: C106640
Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional) ► 260.00
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 27 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mary Dunn
 Mailing Address 9333 SW 22 st
 City State Zip Code
 Oklahoma City OK 73128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer International Union UAW Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00
 Date of Receipt MM / DD / YYYY
 09 / 06 / 2007
Transaction ID: C108887
 Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
Mary Dunn
 Mailing Address 9333 SW 22 st
 City State Zip Code
 Oklahoma City OK 73128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer International Union UAW Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00
 Date of Receipt MM / DD / YYYY
 10 / 10 / 2007
Transaction ID: C113324
 Amount of Each Receipt this Period 60.00

C. Full Name (Last, First, Middle Initial)
Mary Dunn
 Mailing Address 9333 SW 22 st
 City State Zip Code
 Oklahoma City OK 73128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer International Union UAW Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00
 Date of Receipt MM / DD / YYYY
 10 / 25 / 2007
Transaction ID: C115783
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 120.00
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 28 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
Mary Dunn
 Mailing Address 9333 SW 22 st
 City Oklahoma City State OK Zip Code 73128
 Date of Receipt 11 / 20 / 2007
 Transaction ID: C118194
 Amount of Each Receipt this Period 40.00
 FEC ID number of contributing federal political committee. C
 Name of Employer International Union UAW Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 460.00

B. Full Name (Last, First, Middle Initial)
Bradley J Ellison
 Mailing Address 2755 BAMLET RD
 City ROYAL OAK State MI Zip Code 48073
 Date of Receipt 08 / 15 / 2007
 Transaction ID: C107248
 Amount of Each Receipt this Period 120.00
 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 400.00

C. Full Name (Last, First, Middle Initial)
Bradley J Ellison
 Mailing Address 2755 BAMLET RD
 City ROYAL OAK State MI Zip Code 48073
 Date of Receipt 10 / 10 / 2007
 Transaction ID: C113874
 Amount of Each Receipt this Period 160.00
 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 400.00

SUBTOTAL of Receipts This Page (optional) ▶ 320.00
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 29 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.	Full Name (Last, First, Middle Initial) Timothy Farr		Date of Receipt MM / DD / YYYY 08 / 15 / 2007		
	Mailing Address 43107 Ryegate St		Transaction ID: C108272		
	City CANTON	State MI	Zip Code 48187	Amount of Each Receipt this Period 84.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00			

B.	Full Name (Last, First, Middle Initial) Timothy Farr		Date of Receipt MM / DD / YYYY 10 / 10 / 2007		
	Mailing Address 43107 Ryegate St		Transaction ID: C113870		
	City CANTON	State MI	Zip Code 48187	Amount of Each Receipt this Period 112.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00			

C.	Full Name (Last, First, Middle Initial) ROLAND FLETCHER		Date of Receipt MM / DD / YYYY 08 / 15 / 2007		
	Mailing Address 2500 THOMAS DR #1423		Transaction ID: C107227		
	City EDMOND	State OK	Zip Code 73003	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

SUBTOTAL of Receipts This Page (optional)	▶	496.00
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 30 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)
ROLAND FLETCHER

Mailing Address 2500 THOMAS DR
#1423

City State Zip Code
EDMOND OK 73003

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 ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	0	7

Transaction ID: C114116

Amount of Each Receipt this Period

400.00

B.

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

Mailing Address PO BOX 2500

City State Zip Code
NAPA CA 94558

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

Name of Employer Occupation
American Income Life Insurance Agent

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	7

Transaction ID: C108146

Amount of Each Receipt this Period

600.00

C.

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

Mailing Address PO BOX 2500

City State Zip Code
NAPA CA 94558

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

Name of Employer Occupation
American Income Life Insurance Agent

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	0	7

Transaction ID: C113661

Amount of Each Receipt this Period

800.00

SUBTOTAL of Receipts This Page (optional) ►

1800.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Cindy Furer
Mailing Address 374 E Pelican Ct
City Fresno State CA Zip Code 93720-1254
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 ▼ 3000.00
Date of Receipt 08 / 15 / 2007
Transaction ID: C107346
Amount of Each Receipt this Period 900.00

B. Full Name (Last, First, Middle Initial)
Cindy Furer
Mailing Address 374 E Pelican Ct
City Fresno State CA Zip Code 93720-1254
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 ▼ 3000.00
Date of Receipt 10 / 10 / 2007
Transaction ID: C113663
Amount of Each Receipt this Period 1200.00

C. Full Name (Last, First, Middle Initial)
Geoffrey Gamble
Mailing Address 80 Swan Way #333
City Oakland State CA Zip Code 94621
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 ▼ 210.00
Date of Receipt 08 / 15 / 2007
Transaction ID: C108590
Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► 2140.00
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 32 / 96
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial) Geoffrey Gamble		Date of Receipt MM / DD / YYYY 09 / 17 / 2007
Mailing Address 80 Swan Way #333		Transaction ID: C109138
City Oakland	State CA	Zip Code 94621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Local 29	Occupation Business Rep.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B.

Full Name (Last, First, Middle Initial) Geoffrey Gamble		Date of Receipt MM / DD / YYYY 10 / 10 / 2007
Mailing Address 80 Swan Way #333		Transaction ID: C113532
City Oakland	State CA	Zip Code 94621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Local 29	Occupation Business Rep.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C.

Full Name (Last, First, Middle Initial) Geoffrey Gamble		Date of Receipt MM / DD / YYYY 11 / 13 / 2007
Mailing Address 80 Swan Way #333		Transaction ID: C117948
City Oakland	State CA	Zip Code 94621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Local 29	Occupation Business Rep.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Geoffrey Gamble		Date of Receipt MM / DD / YYYY 12 / 11 / 2007		
	Mailing Address 80 Swan Way #333		Transaction ID: C118943		
	City Oakland	State CA	Zip Code 94621	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 210.00		
	Name of Employer Local 29		Occupation Business Rep.		

B.	Full Name (Last, First, Middle Initial) Larry Geneser		Date of Receipt MM / DD / YYYY 08 / 15 / 2007		
	Mailing Address 13515 S PEBBLEBROOK LN		Transaction ID: C107055		
	City GREENWOOD	State MO	Zip Code 64034	Amount of Each Receipt this Period 1200.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 4000.00		
	Name of Employer American Income Life		Occupation Insurance Agent		

C.	Full Name (Last, First, Middle Initial) Larry Geneser		Date of Receipt MM / DD / YYYY 10 / 10 / 2007		
	Mailing Address 13515 S PEBBLEBROOK LN		Transaction ID: C113922		
	City GREENWOOD	State MO	Zip Code 64034	Amount of Each Receipt this Period 1600.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 4000.00		
	Name of Employer American Income Life		Occupation Insurance Agent		

SUBTOTAL of Receipts This Page (optional)	▶	2840.00
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 34 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
SALVATORE GIACCHI
Mailing Address 83 DAVIS RD
City FRANKLIN State NJ Zip Code 07416
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 ▼ 264.00
Date of Receipt 08 / 15 / 2007
Transaction ID: C107610
Amount of Each Receipt this Period 75.00

B. Full Name (Last, First, Middle Initial)
SALVATORE GIACCHI
Mailing Address 83 DAVIS RD
City FRANKLIN State NJ Zip Code 07416
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 ▼ 264.00
Date of Receipt 10 / 10 / 2007
Transaction ID: C113983
Amount of Each Receipt this Period 108.00

C. Full Name (Last, First, Middle Initial)
Eric Giglione
Mailing Address 3 PARKWOOD DR
City COLTS NECK State NJ Zip Code 07722
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 ▼ 4000.00
Date of Receipt 08 / 15 / 2007
Transaction ID: C107271
Amount of Each Receipt this Period 1200.00

SUBTOTAL of Receipts This Page (optional) ► 1383.00
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 35 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial)
Eric Giglione

Mailing Address 3 PARKWOOD DR

City State Zip Code
COLTS NECK NJ 07722

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 ▼ 4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	0	7

Transaction ID: C113985

Amount of Each Receipt this Period

1600.00

B.

Full Name (Last, First, Middle Initial)
Erik Graham

Mailing Address 9741 RESEDA BLVD #39

City State Zip Code
NORTHRIDGE CA 91324

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

Name of Employer Occupation
AMERICAN INCOME LIFE INS. 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
0	8		1	5		2	0	0	7

Transaction ID: C107661

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
Erik Graham

Mailing Address 9741 RESEDA BLVD #39

City State Zip Code
NORTHRIDGE CA 91324

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

Name of Employer Occupation
AMERICAN INCOME LIFE INS. 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
1	0		1	0		2	0	0	7

Transaction ID: C113655

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1775.00

TOTAL This Period (last page this line number only)

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**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 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Arthur J GREENE	Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 1837 SQUIRREL VALLEY DR	Transaction ID: C107129
	City State Zip Code BLOOMFIELD HILLS MI 48304	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Arthur J GREENE	Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 1837 SQUIRREL VALLEY DR	Transaction ID: C113878
	City State Zip Code BLOOMFIELD HILLS MI 48304	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Steven Greer	Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address PO Box 208	Transaction ID: C108144
	City State Zip Code Waco TX 76703-0208	Amount of Each Receipt this Period 900.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NATIONAL INCOME LIFE Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
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 37 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address PO Box 208

City State Zip Code
Waco TX 76703-0208

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

Name of Employer NATIONAL INCOME LIFE Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C114297

Amount of Each Receipt this Period
1200.00

B. Full Name (Last, First, Middle Initial)
Ronald Gurney, Jr.

Mailing Address 2360 Forest Hills Dr

City State Zip Code
Lake Orion MI 48359

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 ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113879

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Ronald Gurney Jr

Mailing Address 201 N SQUIRREL RD

City State Zip Code
AUBURN HILLS MI 48236

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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: C108199

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► 1900.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Frederick Hadayia Jr		Date of Receipt MM / DD / YYYY 08 / 15 / 2007		
	Mailing Address 101 IRON VALLEY DR		Transaction ID: C108165		
	City LEBANON	State PA	Zip Code 17042	Amount of Each Receipt this Period 900.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00			

B.	Full Name (Last, First, Middle Initial) Frederick Hadayia Jr		Date of Receipt MM / DD / YYYY 10 / 10 / 2007		
	Mailing Address 101 IRON VALLEY DR		Transaction ID: C114165		
	City LEBANON	State PA	Zip Code 17042	Amount of Each Receipt this Period 1200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00			

C.	Full Name (Last, First, Middle Initial) John Hancock		Date of Receipt MM / DD / YYYY 08 / 15 / 2007		
	Mailing Address 4127 TIMBER CT		Transaction ID: C107369		
	City INDIANAPOLIS	State IN	Zip Code 46250	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
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 39 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)

John Hancock

Mailing Address 4127 TIMBER CT

City State Zip Code
INDIANAPOLIS IN 46250

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 ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113795

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mark Hancock

Mailing Address 12546 WALNUT RIDGE PL

City State Zip Code
FISHERS IN 46038

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: C107033

Amount of Each Receipt this Period

900.00

C.

Full Name (Last, First, Middle Initial)

Mark Hancock

Mailing Address 12546 WALNUT RIDGE PL

City State Zip Code
FISHERS IN 46038

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113797

Amount of Each Receipt this Period

1200.00

SUBTOTAL of Receipts This Page (optional)

2300.00

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 40 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)

Steve Hartman

Mailing Address 3430 N MOUNTAIN RIDGE RD
#69

City State Zip Code
MESA AZ 85207

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

Name of Employer
AMERICAN INCOME LIFE INS.

Occupation
Insurance Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: C107325

Amount of Each Receipt this Period

900.00

B.

Full Name (Last, First, Middle Initial)

Steve Hartman

Mailing Address 3430 N MOUNTAIN RIDGE RD
#69

City State Zip Code
MESA AZ 85207

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

Name of Employer
AMERICAN INCOME LIFE INS.

Occupation
Insurance Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113569

Amount of Each Receipt this Period

1200.00

C.

Full Name (Last, First, Middle Initial)

Rob Hay

Mailing Address PO Box 208

City State Zip Code
Waco TX 76703-0208

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

Name of Employer
American Income Life

Occupation
Insurance Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: C108143

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)

2850.00

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 41 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)

Rob Hay

Mailing Address PO Box 208

City

Waco

State

TX

Zip Code

76703-0208

FEC ID number of contributing federal political committee.

C

Name of Employer
American Income Life

Occupation

Insurance Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C114296

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Willie Hayden

Mailing Address 250 Centerville Rd
Bldg 15

City

Warwick

State

RI

Zip Code

02886

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
0 8 / 1 5 / 2 0 0 7

Transaction ID: C108163

Amount of Each Receipt this Period

90.00

C.

Full Name (Last, First, Middle Initial)

Willie Hayden

Mailing Address 250 Centerville Rd
Bldg 15

City

Warwick

State

RI

Zip Code

02886

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
1 0 / 1 0 / 2 0 0 7

Transaction ID: C114167

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)

1210.00

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 42 / 96
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

A.

Full Name (Last, First, Middle Initial) William Heath		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 129 Mills Ln		Transaction ID: C108222
City New Albany	State IN	Zip Code 47150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) William Heath		Date of Receipt MM / DD / YYYY 10 / 10 / 2007
Mailing Address 129 Mills Ln		Transaction ID: C113796
City New Albany	State IN	Zip Code 47150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Peter Highberg		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 1209-1 LOGAN RD		Transaction ID: C107019
City BETHEL PARK	State PA	Zip Code 15102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	425.00
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 43 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Peter Highberg		Date of Receipt MM / DD / YYYY 10 / 10 / 2007		
	Mailing Address 1209-1 LOGAN RD		Transaction ID: C114163		
	City BETHEL PARK	State PA	Zip Code 15102	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Robert T Hughes		Date of Receipt MM / DD / YYYY 08 / 15 / 2007		
	Mailing Address 1429 SENECA PL		Transaction ID: C107069		
	City CHARLOTTE	State NC	Zip Code 28209	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

C.	Full Name (Last, First, Middle Initial) Robert T Hughes		Date of Receipt MM / DD / YYYY 10 / 10 / 2007		
	Mailing Address 1429 SENECA PL		Transaction ID: C113945		
	City CHARLOTTE	State NC	Zip Code 28209	Amount of Each Receipt this Period 400.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

SUBTOTAL of Receipts This Page (optional)	▶	800.00
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 44 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) David Iriye		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 3540 COLUMBINE ST		Transaction ID: C107335
	City SEAL BEACH	State CA	Zip Code 90740
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
	Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) David Iriye		Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 3540 COLUMBINE ST		Transaction ID: C113656
	City SEAL BEACH	State CA	Zip Code 90740
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) JAMES ISIP		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 1819 Preuss Rd		Transaction ID: C108512
	City Los Angeles	State CA	Zip Code 90035
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
	Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	475.00
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 45 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
JAMES ISIP

Mailing Address 1819 Preuss Rd

City State Zip Code
Los Angeles CA 90035

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 ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113660

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
John 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 ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: C107362

Amount of Each Receipt this Period
600.00

C. Full Name (Last, First, Middle Initial)
John 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 ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113662

Amount of Each Receipt this Period
800.00

SUBTOTAL of Receipts This Page (optional) ► 1800.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
William Jennings
Mailing Address 17961 E EUCLID PL
City State Zip Code
AURORA CO 80016
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 ▼ 2000.00
Date of Receipt MM / DD / YYYY
08 / 15 / 2007
Transaction ID: C107122
Amount of Each Receipt this Period 600.00

B. Full Name (Last, First, Middle Initial)
William Jennings
Mailing Address 17961 E EUCLID PL
City State Zip Code
AURORA CO 80016
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 ▼ 2000.00
Date of Receipt MM / DD / YYYY
10 / 10 / 2007
Transaction ID: C113692
Amount of Each Receipt this Period 800.00

C. Full Name (Last, First, Middle Initial)
Theresa L. Kandt
Mailing Address 66755 Powell Rd
City State Zip Code
Washington MI 48095
FEC ID number of contributing federal political committee. **C**
Name of Employer LOCAL 42 Occupation Sec-Treas.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 782.00
Date of Receipt MM / DD / YYYY
07 / 11 / 2007
Transaction ID: C106340
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1900.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Theresa L. Kandt	Date of Receipt MM / DD / YYYY 07 / 17 / 2007
	Mailing Address 66755 Powell Rd	Transaction ID: C106449
	City Washington State MI Zip Code 48095	Amount of Each Receipt this Period 24.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer LOCAL 42 Occupation Sec-Treas. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 782.00	

B.	Full Name (Last, First, Middle Initial) Theresa L. Kandt	Date of Receipt MM / DD / YYYY 08 / 24 / 2007
	Mailing Address 66755 Powell Rd	Transaction ID: C106911
	City Washington State MI Zip Code 48095	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer LOCAL 42 Occupation Sec-Treas. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 782.00	

C.	Full Name (Last, First, Middle Initial) Theresa L. Kandt	Date of Receipt MM / DD / YYYY 09 / 20 / 2007
	Mailing Address 66755 Powell Rd	Transaction ID: C109151
	City Washington State MI Zip Code 48095	Amount of Each Receipt this Period 24.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer LOCAL 42 Occupation Sec-Treas. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 782.00	

SUBTOTAL of Receipts This Page (optional)	78.00
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 48 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.	Full Name (Last, First, Middle Initial) Theresa L. Kandt		Date of Receipt	
	Mailing Address 66755 Powell Rd		M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: C115606
	Washington	MI	48095	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		24.00	
Name of Employer LOCAL 42		Occupation Sec-Treas.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 782.00		

B.	Full Name (Last, First, Middle Initial) Theresa L. Kandt		Date of Receipt	
	Mailing Address 66755 Powell Rd		M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: C117944
	Washington	MI	48095	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.00	
Name of Employer LOCAL 42		Occupation Sec-Treas.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 782.00		

C.	Full Name (Last, First, Middle Initial) Theresa L. Kandt		Date of Receipt	
	Mailing Address 66755 Powell Rd		M M / D D / Y Y Y Y Y 1 2 / 1 3 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: C118963
	Washington	MI	48095	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		24.00	
Name of Employer LOCAL 42		Occupation Sec-Treas.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 782.00		

SUBTOTAL of Receipts This Page (optional)	▶	78.00
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 49 / 96
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial) Terry Keller		Date of Receipt MM / DD / YYYY 07 / 09 / 2007
Mailing Address 1137 Walpert St Apt 26		Transaction ID: C106329
City Hayward	State CA	Zip Code 94541-6768
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer LOCAL 29	Occupation Business Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 357.00	

B.

Full Name (Last, First, Middle Initial) Terry Keller		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 1137 Walpert St Apt 26		Transaction ID: C108589
City Hayward	State CA	Zip Code 94541-6768
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer LOCAL 29	Occupation Business Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 357.00	

C.

Full Name (Last, First, Middle Initial) Terry Keller		Date of Receipt MM / DD / YYYY 09 / 17 / 2007
Mailing Address 1137 Walpert St Apt 26		Transaction ID: C109137
City Hayward	State CA	Zip Code 94541-6768
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer LOCAL 29	Occupation Business Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 357.00	

SUBTOTAL of Receipts This Page (optional)	▶	105.00
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 50 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Terry Keller

Mailing Address 1137 Walpert 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 ▼ 357.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113531

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Terry Keller

Mailing Address 1137 Walpert 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 ▼ 357.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: C117947

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Terry Keller

Mailing Address 1137 Walpert 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 ▼ 357.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: C118942

Amount of Each Receipt this Period
40.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
STEVEN KING

Mailing Address 24331 FAIRWAY HILLS 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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	7

Transaction ID: C107219

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
STEVEN KING

Mailing Address 24331 FAIRWAY HILLS 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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	0	/	2	0	0	7

Transaction ID: C113880

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Adam Kiss

Mailing Address 89 HIGHLAND AVE

City State Zip Code
EASTCHESTER NY 10709

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

Name of Employer National Income Life Occupation Insurance Agent

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	7

Transaction ID: C107626

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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 52 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Adam Kiss	Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 89 HIGHLAND AVE	Transaction ID: C114053
	City EASTCHESTER State NY Zip Code 10709	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
Name of Employer National Income Life Occupation Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Kevin Kistler	Date of Receipt MM / DD / YYYY 08 / 27 / 2007
	Mailing Address 10722 Brewer House Rd	Transaction ID: C106919
	City Rockville State MD Zip Code 20852-3420	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer OPEIU Occupation Dir. Organ. & Field Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Kevin Kistler	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 10722 Brewer House Rd	Transaction ID: C109229
	City Rockville State MD Zip Code 20852-3420	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer OPEIU Occupation Dir. Organ. & Field Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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: PAGE 53 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Kevin Kistler
 Mailing Address 10722 Brewer House Rd
 City State Zip Code
 Rockville MD 20852-3420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 OPEIU Dir. Organ. & Field Service
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 3 / 2 0 0 7
Transaction ID: C115585
 Amount of Each Receipt this Period
 50.00

B. Full Name (Last, First, Middle Initial)
Kevin Kistler
 Mailing Address 10722 Brewer House Rd
 City State Zip Code
 Rockville MD 20852-3420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 OPEIU Dir. Organ. & Field Service
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 6 / 2 0 0 7
Transaction ID: C117959
 Amount of Each Receipt this Period
 50.00

C. Full Name (Last, First, Middle Initial)
Kevin Kistler
 Mailing Address 10722 Brewer House Rd
 City State Zip Code
 Rockville MD 20852-3420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 OPEIU Dir. Organ. & Field Service
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 2 / 2 0 0 7
Transaction ID: C118954
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00
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 54 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Tracy Komer

Mailing Address 23061 Gary Ln

City State Zip Code
St Clair Shores MI 48080

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

Name of Employer International Union UAW Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	3	/	2	0	0	7

Transaction ID: C106191

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Tracy Komer

Mailing Address 23061 Gary Ln

City State Zip Code
St Clair Shores MI 48080

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

Name of Employer International Union UAW Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	0	/	2	0	0	7

Transaction ID: C106638

Amount of Each Receipt this Period
18.00

C. Full Name (Last, First, Middle Initial)
Tracy Komer

Mailing Address 23061 Gary Ln

City State Zip Code
St Clair Shores MI 48080

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

Name of Employer International Union UAW Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	6	/	2	0	0	7

Transaction ID: C108873

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional) ► **1530.00**

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 55 / 96
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
Tracy Komer

Mailing Address 23061 Gary Ln

City State Zip Code
St Clair Shores MI 48080

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

Name of Employer International Union UAW Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113322

Amount of Each Receipt this Period
18.00

B.

Full Name (Last, First, Middle Initial)
Tracy Komer

Mailing Address 23061 Gary Ln

City State Zip Code
St Clair Shores MI 48080

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

Name of Employer International Union UAW Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 7

Transaction ID: C115781

Amount of Each Receipt this Period
6.00

C.

Full Name (Last, First, Middle Initial)
Tracy Komer

Mailing Address 23061 Gary Ln

City State Zip Code
St Clair Shores MI 48080

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

Name of Employer International Union UAW Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: C118180

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional) ► **36.00**

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 56 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Christopher Q Lafond
Mailing Address 8030 Sherwood Dr
City Presto State PA Zip Code 15142-1078
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 ▼ 2000.00
Date of Receipt 08 / 15 / 2007
Transaction ID: C107590
Amount of Each Receipt this Period 600.00

B. Full Name (Last, First, Middle Initial)
Christopher Q Lafond
Mailing Address 8030 Sherwood Dr
City Presto State PA Zip Code 15142-1078
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 ▼ 2000.00
Date of Receipt 10 / 10 / 2007
Transaction ID: C114164
Amount of Each Receipt this Period 800.00

C. Full Name (Last, First, Middle Initial)
SCOTT LATTA
Mailing Address 5603 W 125TH ST
City OVERLAND PARK State KS Zip Code 66209
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 ▼ 1000.00
Date of Receipt 08 / 15 / 2007
Transaction ID: C107471
Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ► 1700.00
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 57 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) SCOTT LATTA	Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 5603 W 125TH ST	Transaction ID: C113803
	City State Zip Code OVERLAND PARK KS 66209	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Patricia G Lee	Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 7509 YELLOW WOOD	Transaction ID: C107571
	City State Zip Code Lansing MI 48917	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Patricia G Lee	Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 7509 YELLOW WOOD	Transaction ID: C113881
	City State Zip Code Lansing MI 48917	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
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 58 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Green P Lewis, Jr.	Date of Receipt MM / DD / YYYY 07 / 12 / 2007
	Mailing Address PO Box 12493	Transaction ID: C106411
	City State Zip Code Columbus GA 31917	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation OPEIU International Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Joe Manone	Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address N89 W15883 MAIN ST Suite 101	Transaction ID: C107666
	City State Zip Code MENOMONEE FALLS WI 53051	Amount of Each Receipt this Period 900.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation American Income Life Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

C.	Full Name (Last, First, Middle Initial) Joe Manone	Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address N89 W15883 MAIN ST Suite 101	Transaction ID: C114363
	City State Zip Code MENOMONEE FALLS WI 53051	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation American Income Life Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2600.00
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 59 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.	Full Name (Last, First, Middle Initial) Rick Mansfield	Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 11230 W Meadowriver Dr	Transaction ID: C108249
	City State Zip Code Star ID 83669	Amount of Each Receipt this Period 240.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer AMERICAN INCOME LIFE INS. CO Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 640.00	

B.	Full Name (Last, First, Middle Initial) Rick Mansfield	Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 11230 W Meadowriver Dr	Transaction ID: C113748
	City State Zip Code Star ID 83669	Amount of Each Receipt this Period 320.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer AMERICAN INCOME LIFE INS. CO Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 640.00	

C.	Full Name (Last, First, Middle Initial) John Mattiacci	Date of Receipt MM / DD / YYYY 07 / 11 / 2007
	Mailing Address 1146 Foxchase Rd	Transaction ID: C106341
	City State Zip Code Rydal PA 19046-3324	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Guild 45 Occupation Sec.-Treas. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1060.00
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 60 / 96
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial) John McCreary		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 4747 MARINA DR #5		Transaction ID: C107415
City CARLSBAD	State CA	Zip Code 92008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) John McCreary		Date of Receipt MM / DD / YYYY 10 / 10 / 2007
Mailing Address 4747 MARINA DR #5		Transaction ID: C113658
City CARLSBAD	State CA	Zip Code 92008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Jared M Mlinarich		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
Mailing Address 9254 PINE WALK PASS		Transaction ID: C107647
City Linden	State MI	Zip Code 48451
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer American Income Life	Occupation Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	470.00
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 61 / 96
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
Jared M Mlinarich

Mailing Address 9254 PINE WALK PASS

City Linden State MI Zip Code 48451

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 ▼ 400.00

Date of Receipt: 10 / 10 / 2007
Transaction ID: C113875
Amount of Each Receipt this Period: 160.00

B.

Full Name (Last, First, Middle Initial)
Suzanne Mode

Mailing Address 6515 Francis Ave N

City Seattle State WA Zip Code 98103-5243

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

Name of Employer LOCAL 8 Occupation Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 272.82

Date of Receipt: 07 / 03 / 2007
Transaction ID: C106176
Amount of Each Receipt this Period: 20.00

C.

Full Name (Last, First, Middle Initial)
Suzanne Mode

Mailing Address 6515 Francis Ave N

City Seattle State WA Zip Code 98103-5243

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

Name of Employer LOCAL 8 Occupation Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 272.82

Date of Receipt: 07 / 30 / 2007
Transaction ID: C106777
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► 200.00

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 62 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
Suzanne Mode

Mailing Address 6515 Francis Ave N

City State Zip Code
Seattle WA 98103-5243

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

Name of Employer Occupation
LOCAL 8 Business Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 272.82

Date of Receipt

M M / D D / Y Y Y Y
08 / 31 / 2007

Transaction ID: C108710

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
Suzanne Mode

Mailing Address 6515 Francis Ave N

City State Zip Code
Seattle WA 98103-5243

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

Name of Employer Occupation
LOCAL 8 Business Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 272.82

Date of Receipt

M M / D D / Y Y Y Y
10 / 02 / 2007

Transaction ID: C111184

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)
Suzanne Mode

Mailing Address 6515 Francis Ave N

City State Zip Code
Seattle WA 98103-5243

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

Name of Employer Occupation
LOCAL 8 Business Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 272.82

Date of Receipt

M M / D D / Y Y Y Y
10 / 30 / 2007

Transaction ID: C115917

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional) ▶

65.00

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 63 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
Suzanne Mode

Mailing Address 6515 Francis Ave N

City State Zip Code
Seattle WA 98103-5243

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

Name of Employer Occupation
LOCAL 8 Business Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 272.82

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: C118832

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
Jason A Mollo

Mailing Address 12233 Town Walk Dr

City State Zip Code
Hamden CT 06518

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
0 8 / 1 5 / 2 0 0 7

Transaction ID: C108254

Amount of Each Receipt this Period

90.00

C.

Full Name (Last, First, Middle Initial)
Jason A Mollo

Mailing Address 12233 Town Walk Dr

City State Zip Code
Hamden CT 06518

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
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113700

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)

235.00

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 64 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Maxine V Moody
Mailing Address 68 HEATHER LN
City NEW BRITAIN State CT Zip Code 06053
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 08 / 15 / 2007
Transaction ID: C107539
Amount of Each Receipt this Period 90.00

B. Full Name (Last, First, Middle Initial)
Maxine V Moody
Mailing Address 68 HEATHER LN
City NEW BRITAIN State CT Zip Code 06053
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 10 / 10 / 2007
Transaction ID: C113701
Amount of Each Receipt this Period 120.00

C. Full Name (Last, First, Middle Initial)
Joseph K Moore
Mailing Address 3442 DELLE FIELD
City NEWPORT RICHEY State FL Zip Code 34655
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 ▼ 500.00
Date of Receipt 08 / 15 / 2007
Transaction ID: C107327
Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional) ► 360.00
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 65 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Joseph K Moore
Mailing Address 3442 DELLE FIELD
City NEWPORT RICHEY State FL Zip Code 34655
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 ▼ 500.00
Date of Receipt 10 / 10 / 2007
Transaction ID: C113718
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Marc Morton
Mailing Address 2476 POWELL AVE
City COLUMBUS State OH Zip Code 43209
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 ▼ 4000.00
Date of Receipt 08 / 15 / 2007
Transaction ID: C107222
Amount of Each Receipt this Period 1200.00

C. Full Name (Last, First, Middle Initial)
Marc Morton
Mailing Address 2476 POWELL AVE
City COLUMBUS State OH Zip Code 43209
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 ▼ 4000.00
Date of Receipt 10 / 10 / 2007
Transaction ID: C114111
Amount of Each Receipt this Period 1600.00

SUBTOTAL of Receipts This Page (optional) ► 3000.00
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 66 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)

Martha Moss

Mailing Address 1256 Fm 2803

City State Zip Code
Lipan TX 76462-7017

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 ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 11 / 2007

Transaction ID: C106337

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Susanne M Munro

Mailing Address 4627 Pine Dr

City State Zip Code
Holland MI 49423

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 ▼ 901.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: C108212

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Susanne M Munro

Mailing Address 4627 Pine Dr

City State Zip Code
Holland MI 49423

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 ▼ 901.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 10 / 2007

Transaction ID: C113876

Amount of Each Receipt this Period

301.00

SUBTOTAL of Receipts This Page (optional)

1101.00

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 / 96
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Eric J Neal		Date of Receipt
	Mailing Address 209 Lambeth Ln		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 15 / 2007
	City	State	Zip Code
	Saint Louis	MO	63125
	FEC ID number of contributing federal political committee. C		Transaction ID: C108209
Name of Employer American Income Life		Occupation Insurance Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2700.00	600.00

B.	Full Name (Last, First, Middle Initial) Eric J Neal		Date of Receipt
	Mailing Address 209 Lambeth Ln		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 10 / 2007
	City	State	Zip Code
	Saint Louis	MO	63125
	FEC ID number of contributing federal political committee. C		Transaction ID: C113921
Name of Employer American Income Life		Occupation Insurance Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2700.00	1200.00

C.	Full Name (Last, First, Middle Initial) Dorian S Oldham		Date of Receipt
	Mailing Address 8961 CENTER POINTE DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 15 / 2007
	City	State	Zip Code
	BALDWINVILLE	NY	13027
	FEC ID number of contributing federal political committee. C		Transaction ID: C107630
Name of Employer NATIONAL INCOME LIFE		Occupation Insurance Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	75.00

SUBTOTAL of Receipts This Page (optional)	1875.00
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 68 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Dorian S Oldham		Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 8961 CENTER POINTE DR		Transaction ID: C114051
	City BALDWINVILLE	State NY	Zip Code 13027
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer NATIONAL INCOME LIFE	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) DURHON RENAH R OLDHAM		Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 1995 HARRIS RD		Transaction ID: C107149
	City PENFIELD	State NY	Zip Code 14526
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00
	Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4446.22	

C.	Full Name (Last, First, Middle Initial) DURHON RENAH R OLDHAM		Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 1995 HARRIS RD		Transaction ID: C114055
	City PENFIELD	State NY	Zip Code 14526
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1600.00
	Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4446.22	

SUBTOTAL of Receipts This Page (optional)

2900.00

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 69 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) ROBERT OLSON, Jr		Date of Receipt MM / DD / YYYY 08 / 15 / 2007		
	Mailing Address 26561 W HGHLAND DR		Transaction ID: C107240		
	City CHANNAHON	State IL	Zip Code 60410	Amount of Each Receipt this Period 1200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4000.00			

B.	Full Name (Last, First, Middle Initial) ROBERT OLSON, Jr		Date of Receipt MM / DD / YYYY 10 / 10 / 2007		
	Mailing Address 26561 W HGHLAND DR		Transaction ID: C113775		
	City CHANNAHON	State IL	Zip Code 60410	Amount of Each Receipt this Period 1600.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4000.00			

C.	Full Name (Last, First, Middle Initial) Gleb Ostrovsky		Date of Receipt MM / DD / YYYY 08 / 15 / 2007		
	Mailing Address 110 GREENRIDGE DR		Transaction ID: C106946		
	City MADISON	State MS	Zip Code 39110	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

SUBTOTAL of Receipts This Page (optional)	▶	3100.00
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 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.	Full Name (Last, First, Middle Initial) Gleb Ostrovsky		Date of Receipt																					
	Mailing Address 110 GREENRIDGE DR		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	0		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		1	0		2	0	0	7														
	City State Zip Code MADISON MS 39110		Transaction ID: C113928																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: American Income Life Occupation: Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		400.00																						

B.	Full Name (Last, First, Middle Initial) Christine Page		Date of Receipt																					
	Mailing Address 14152 Foothill Blvd #14		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	2		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	7		1	2		2	0	0	7														
	City State Zip Code Sylmar CA 91342		Transaction ID: C106407																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Local 174 Occupation: Business Rep. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		500.00																						

C.	Full Name (Last, First, Middle Initial) GREGORY PARTEE		Date of Receipt																					
	Mailing Address 117 CAHABA RIVER PARK		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	8		1	5		2	0	0	7														
	City State Zip Code BIRMINGHAM AL 35243		Transaction ID: C106967																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: American Income Life Occupation: Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00		300.00																						

SUBTOTAL of Receipts This Page (optional)	▶	1200.00
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 71 / 96
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
GREGORY PARTEE

Mailing Address 117 CAHABA RIVER PARK

City State Zip Code
BIRMINGHAM AL 35243

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
10 / 10 / 2007

Transaction ID: C113544

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Phillip R Pope

Mailing Address 110 Greenbriar Drive

City State Zip Code
Knoxville TN 37919

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

Name of Employer OPEIU Local #2001 Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2007

Transaction ID: C106334

Amount of Each Receipt this Period
350.00

C.

Full Name (Last, First, Middle Initial)
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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 12 / 2007

Transaction ID: C106410

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1150.00**

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 72 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)

Patricia Priloh

Mailing Address 303 Diamond Ave

City

Brownsville

State

PA

Zip Code

15417-8645

FEC ID number of contributing federal political committee.

C

Name of Employer
OPEIU

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	7	/	2	0	0	7

Transaction ID: C106918

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Patricia Priloh

Mailing Address 303 Diamond Ave

City

Brownsville

State

PA

Zip Code

15417-8645

FEC ID number of contributing federal political committee.

C

Name of Employer
OPEIU

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	1	/	2	0	0	7

Transaction ID: C109228

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Patricia Priloh

Mailing Address 303 Diamond Ave

City

Brownsville

State

PA

Zip Code

15417-8645

FEC ID number of contributing federal political committee.

C

Name of Employer
OPEIU

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	7

Transaction ID: C115584

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

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 73 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)

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 Occupation
OPEIU Vice President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: C117958

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

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 Occupation
OPEIU Vice President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: C118953

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Marc E Rosen

Mailing Address 96 Rivington Ave

City State Zip Code
Staten Island NY 10314

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

Name of Employer Occupation
National Income Life Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: C108510

Amount of Each Receipt this Period

900.00

SUBTOTAL of Receipts This Page (optional)

960.00

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 74 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Marc E Rosen	Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 96 Rivington Ave	Transaction ID: C114054
	City State Zip Code Staten Island NY 10314	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer National Income Life Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00	

B.	Full Name (Last, First, Middle Initial) TORRENCE ROWELL	Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 239 ORCHARD DR	Transaction ID: C107211
	City State Zip Code TEMPLE GA 30179	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) TORRENCE ROWELL	Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 239 ORCHARD DR	Transaction ID: C113728
	City State Zip Code TEMPLE GA 30179	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	1480.00
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 75 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

<p>A. Full Name (Last, First, Middle Initial) Tamara Rubyn</p> <p>Mailing Address PO Box 149</p> <p>City State Zip Code Carmichael CA 95609-0149</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer LOCAL 29 Occupation President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 365.00</p>	<p>Date of Receipt 07 / 09 / 2007</p> <p>Transaction ID: C106327</p> <p>Amount of Each Receipt this Period 20.00</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Tamara Rubyn</p> <p>Mailing Address PO Box 149</p> <p>City State Zip Code Carmichael CA 95609-0149</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer LOCAL 29 Occupation President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 365.00</p>	<p>Date of Receipt 08 / 15 / 2007</p> <p>Transaction ID: C108587</p> <p>Amount of Each Receipt this Period 45.00</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) Tamara Rubyn</p> <p>Mailing Address PO Box 149</p> <p>City State Zip Code Carmichael CA 95609-0149</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer LOCAL 29 Occupation President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 365.00</p>	<p>Date of Receipt 09 / 17 / 2007</p> <p>Transaction ID: C109135</p> <p>Amount of Each Receipt this Period 40.00</p>
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SUBTOTAL of Receipts This Page (optional)	105.00
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 76 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: C113529

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: C117945

Amount of Each Receipt this Period
50.00

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: C118940

Amount of Each Receipt this Period
40.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Paul D Rumbuc
Mailing Address 3570 MAGNOLOIA 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 ▼ 4000.00
Date of Receipt 08 / 15 / 2007
Transaction ID: C107337
Amount of Each Receipt this Period 1200.00

B. Full Name (Last, First, Middle Initial)
Paul D Rumbuc
Mailing Address 3570 MAGNOLOIA 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 ▼ 4000.00
Date of Receipt 10 / 10 / 2007
Transaction ID: C113883
Amount of Each Receipt this Period 1600.00

C. Full Name (Last, First, Middle Initial)
Patricia Sanchez
Mailing Address 344 Rock Creek Way
City Pleasant Hill State CA Zip Code 94523-4718
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 ▼ 365.00
Date of Receipt 07 / 09 / 2007
Transaction ID: C106328
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 2820.00
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 78 / 96
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
Patricia Sanchez

Mailing Address 344 Rock Creek Way

City Pleasant Hill State CA Zip Code 94523-4718

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 ▼ 365.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	7

Transaction ID: C108588

Amount of Each Receipt this Period 45.00

B.

Full Name (Last, First, Middle Initial)
Patricia Sanchez

Mailing Address 344 Rock Creek Way

City Pleasant Hill State CA Zip Code 94523-4718

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 ▼ 365.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	0	7

Transaction ID: C109136

Amount of Each Receipt this Period 40.00

C.

Full Name (Last, First, Middle Initial)
Patricia Sanchez

Mailing Address 344 Rock Creek Way

City Pleasant Hill State CA Zip Code 94523-4718

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 ▼ 365.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	0	/	2	0	0	7

Transaction ID: C113530

Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► **125.00**

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 79 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Patricia Sanchez

Mailing Address 344 Rock Creek Way

City Pleasant Hill State CA Zip Code 94523-4718

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 ▼ 365.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: C117946

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Patricia Sanchez

Mailing Address 344 Rock Creek Way

City Pleasant Hill State CA Zip Code 94523-4718

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 ▼ 365.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: C118941

Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
Imran Satti

Mailing Address PO Box 208

City Waco State TX Zip Code 76703-0208

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

Name of Employer American Income Life Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: C108145

Amount of Each Receipt this Period 900.00

SUBTOTAL of Receipts This Page (optional) ► 990.00

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 80 / 96
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
Imran Satti

Mailing Address PO Box 208

City State Zip Code
Waco TX 76703-0208

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

Name of Employer American Income Life Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
10 / 10 / 2007

Transaction ID: C114298

Amount of Each Receipt this Period
1200.00

B.

Full Name (Last, First, Middle Initial)
Tim D Schroeder

Mailing Address 279 Highfield Dr #E

City State Zip Code
Columbus OH 43214

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
MM / DD / YYYY
08 / 15 / 2007

Transaction ID: C108226

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)
Tim D Schroeder

Mailing Address 279 Highfield Dr #E

City State Zip Code
Columbus OH 43214

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
MM / DD / YYYY
10 / 10 / 2007

Transaction ID: C114110

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 1375.00

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 81 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Melvin S Schwarzwald

Mailing Address 2950 Warrensville Center Rd

City State Zip Code
Shaker Heights OH 44122

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

Name of Employer Occupation
Schwarzwald & McNair OPEIU Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 12 / 2007

Transaction ID: C106408

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
James Surace

Mailing Address PO BOX 33160

City State Zip Code
NORTH ROYALTON OH 44133

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 ▼ 4160.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: C108151

Amount of Each Receipt this Period
1248.00

C. Full Name (Last, First, Middle Initial)
James Surace

Mailing Address PO BOX 33160

City State Zip Code
NORTH ROYALTON OH 44133

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 ▼ 4160.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 10 / 2007

Transaction ID: C114112

Amount of Each Receipt this Period
1664.00

SUBTOTAL of Receipts This Page (optional) ► **3412.00**

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 82 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)

William C Sykes

Mailing Address 110 LINCOLN ST

City	State	Zip Code
Patterson	LA	70392

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

Name of Employer Local 107	Occupation Sec.-Treas./Bus. Agent
-------------------------------	--------------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2007

Transaction ID: C106180

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)

Krista M THIEME

Mailing Address 16825 N 14th St
#93

City	State	Zip Code
Phoenix	AZ	85022

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

Name of Employer American Income Life	Occupation Insurance Agent
--	-------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: C108162

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)

Krista M THIEME

Mailing Address 16825 N 14th St
#93

City	State	Zip Code
Phoenix	AZ	85022

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

Name of Employer American Income Life	Occupation Insurance Agent
--	-------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
10 / 10 / 2007

Transaction ID: C113568

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

675.00

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 / 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)

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 Occupation
LOCAL 277 Insurance Agent

Receipt For: 2007
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 12 / 2007

Transaction ID: C106406

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Robert Ulreich

Mailing Address 180 VISTA DEL MOR

City State Zip Code
SAN RAFAEL CA 94901

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 ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: C107123

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Robert Ulreich

Mailing Address 180 VISTA DEL MOR

City State Zip Code
SAN RAFAEL CA 94901

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 ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 10 / 2007

Transaction ID: C113657

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

475.00

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 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) RODNEY WARD		Date of Receipt
	Mailing Address 18944 EMIT RD		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	BROWNSTOWN	MI	48192
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer American Income Life		Occupation Insurance Agent	Transaction ID: C107133
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="300.00"/>

B.	Full Name (Last, First, Middle Initial) RODNEY WARD		Date of Receipt
	Mailing Address 18944 EMIT RD		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	BROWNSTOWN	MI	48192
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer American Income Life		Occupation Insurance Agent	Transaction ID: C113882
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="400.00"/>

C.	Full Name (Last, First, Middle Initial) John West		Date of Receipt
	Mailing Address 107 WILDROSE LN		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	SCOTT DEPOT	WV	25560
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer American Income Life		Occupation Insurance Agent	Transaction ID: C107010
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="75.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="775.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 85 / 96
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
John West
 Mailing Address 107 WILDROSE LN
 City State Zip Code
 SCOTT DEPOT WV 25560
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 0 / 2 0 0 7
Transaction ID: C114368
 Amount of Each Receipt this Period
 100.00
 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

B. Full Name (Last, First, Middle Initial)
Gary D Williams
 Mailing Address 531 STILLWATER DR NW
 City State Zip Code
 MARIETTA GA 30064
 Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 1 5 / 2 0 0 7
Transaction ID: C107454
 Amount of Each Receipt this Period
 300.00
 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 ▼ 1000.00

C. Full Name (Last, First, Middle Initial)
Gary D Williams
 Mailing Address 531 STILLWATER DR NW
 City State Zip Code
 MARIETTA GA 30064
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 0 / 2 0 0 7
Transaction ID: C113729
 Amount of Each Receipt this Period
 400.00
 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 ▼ 1000.00

SUBTOTAL of Receipts This Page (optional) ► 800.00
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 86 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Thomas Williams	Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 10246 SW 22nd PL	Transaction ID: C106993
	City State Zip Code DAVIE FL 33324	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00

B.	Full Name (Last, First, Middle Initial) Thomas Williams	Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 10246 SW 22nd PL	Transaction ID: C113719
	City State Zip Code DAVIE FL 33324	Amount of Each Receipt this Period 1600.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00

C.	Full Name (Last, First, Middle Initial) David Zophin	Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 101 GROUSE HILL RD	Transaction ID: C106985
	City State Zip Code GLASTONBURY CT 06033	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00

SUBTOTAL of Receipts This Page (optional)	4000.00
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 87 / 96	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial) David Zophin		
Mailing Address 101 GROUSE HILL RD		
City GLASTONBURY	State CT	Zip Code 06033
FEC ID number of contributing federal political committee. C		
Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Transaction ID: C113702
Amount of Each Receipt this Period 1600.00

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
TOTAL This Period (last page this line number only)	▶	93860.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 88 / 96

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

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

A.	Full Name (Last, First, Middle Initial) CHET EDWARDS FOR CONGRESS	Transaction ID: D280
	Mailing Address PO Box 23273	Date of Disbursement MM / DD / YYYY 11 / 20 / 2007
	City WACO State TX Zip Code 76702	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement TX 17th Congressional District	011 Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
	State: TX District: 17	O

B.	Full Name (Last, First, Middle Initial) Fred D. Mason, III	Transaction ID: D275
	Mailing Address P.O. Box 22451	Date of Disbursement MM / DD / YYYY 10 / 22 / 2007
	City Baltimore State MD Zip Code 21203	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement MD City Council 11th District.	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
	State: District:	O

C.	Full Name (Last, First, Middle Initial) Garamendi 2010	Transaction ID: D285
	Mailing Address P.O. Box 496	Date of Disbursement MM / DD / YYYY 08 / 27 / 2007
	City Sacramento State CA Zip Code 95812	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Lt. Gov. - CA	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	O

SUBTOTAL of Disbursements This Page (optional)	7500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Hillary Clinton for President	Transaction ID: D276 Date of Disbursement
	Mailing Address 420 Lexington Avenue Suite 3030	<input type="text" value="10"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City New York State NY Zip Code 10170	Amount of Each Disbursement this Period
	Purpose of Disbursement Hillary's 60 Birthday Committee	<input type="text" value="1000.00"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: O	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jaime Franks	Transaction ID: D282 Date of Disbursement
	Mailing Address P.O. Box 3224	<input type="text" value="08"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Jackson State MS Zip Code 39207	Amount of Each Disbursement this Period
	Purpose of Disbursement MS-LT. Governor	<input type="text" value="3000.00"/>
	Candidate Name Jamie Franks	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jerry McNerney	Transaction ID: D288 Date of Disbursement
	Mailing Address P.O. Box 12022	<input type="text" value="09"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Pleasanton State CA Zip Code 94588	Amount of Each Disbursement this Period
	Purpose of Disbursement CA-Congress 11th District	<input type="text" value="1000.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Joan Fitz-Gerald	Transaction ID: D281 Date of Disbursement 08 / 09 / 2007
	Mailing Address P.O. Box 401	
	City Westminster State CO Zip Code 80021	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CO- US Congress 2nd Dist. Category/Type 011	
	Candidate Name Joan Fitz-gerald	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) John Agenbroad	Transaction ID: D278 Date of Disbursement 11 / 09 / 2007
	Mailing Address 1255 S Main Street	
	City Springboro State OH Zip Code 45066	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement OH- Springboro Mayor Category/Type 011	
	Candidate Name John Agenbroad	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
	State: District: O	

C.	Full Name (Last, First, Middle Initial) MA Democratic State Committee/Federal Acct.	Transaction ID: D297 Date of Disbursement 10 / 12 / 2007
	Mailing Address 56 Roland Street, North Lobby Suite 203	
	City Boston State MA Zip Code 02129	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Special Election Category/Type 011	
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
	State: District: Special	

SUBTOTAL of Disbursements This Page (optional)	6500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Robin Weirauch	Transaction ID: D293 Date of Disbursement 12 / 06 / 2007
	Mailing Address 116 S. Main Street	Amount of Each Disbursement this Period 5000.00
	City Bowling Green State OH Zip Code 43402	
	Purpose of Disbursement OH- 5th Congressional Dist. Category/Type 011	
	Candidate Name Robin Weirauch	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
	State: District: O	

B.	Full Name (Last, First, Middle Initial) Sheela Martel	Transaction ID: D286 Date of Disbursement 09 / 05 / 2007
	Mailing Address 122 Dodge Lane	Amount of Each Disbursement this Period 250.00
	City Whitehall State NY Zip Code 12887	
	Purpose of Disbursement NY- Washington Co. Coroner Category/Type 011	
	Candidate Name Sheela Martel	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Steve Beshear	Transaction ID: D279 Date of Disbursement 11 / 09 / 2007
	Mailing Address 700 Capital Avenue, Suite 100	Amount of Each Disbursement this Period 500.00
	City Frankfort State KY Zip Code 40601	
	Purpose of Disbursement KY-Governor Category/Type 011	
	Candidate Name Steve Beshear	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
	State: District: O	

SUBTOTAL of Disbursements This Page (optional)	5750.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Tarrant County Democratic Party</p> <p>Mailing Address 3004 W Lancaster Ave</p> <p>City Fort Worth State TX Zip Code 76107-3009</p> <p>Purpose of Disbursement TX</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: O</p> <p>Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D274</p> <p>Date of Disbursement 10 / 22 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/Type 011</p>
<p>B. Full Name (Last, First, Middle Initial) The Mesabi Fund</p> <p>Mailing Address 918 Beverley Drive</p> <p>City Alexandria State VA Zip Code 22302</p> <p>Purpose of Disbursement TTD Exec. Comm. Dinner Chairman Oberstar</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: O</p> <p>Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D277</p> <p>Date of Disbursement 10 / 22 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type 003</p>
<p>C. Full Name (Last, First, Middle Initial) Laurie Tinnin</p> <p>Mailing Address 2340 Harmony Dr</p> <p>City Burton State MI Zip Code 48509-1164</p> <p>Purpose of Disbursement MI - Burton Mayor</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: O</p> <p>Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D291</p> <p>Date of Disbursement 09 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/Type 011</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A. Full Name (Last, First, Middle Initial) William Galvin <hr/> Mailing Address 444 Washington Street <hr/> City Brighton State MA Zip Code 02135 <hr/> Purpose of Disbursement MA-Sec. of State Candidate Name William Galvin <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: O Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: D283 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 7
	Amount of Each Disbursement this Period 500.00
B. Full Name (Last, First, Middle Initial) William O'Neil <hr/> Mailing Address P.O. Box 601 <hr/> City Chagrin Falls State OH Zip Code 44022 <hr/> Purpose of Disbursement OH- 14th Congressional Candidate Name William O'Neil <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D289 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ►

1500.00

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

28250.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Loretta Sanchez Mailing Address 604 S. Harbor Blvd. City Santa Ana State CA Zip Code 92704 Purpose of Disbursement CA-US Congress Candidate Name Loretta Sanchez Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: O Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: D296 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 7
	Amount of Each Disbursement this Period 5000.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) Patrick Leahy Mailing Address P.O. Box 1042 City Montpelier State VT Zip Code 05601 Purpose of Disbursement US Senator - VT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D268 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 7
	Amount of Each Disbursement this Period 5000.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	10000.00

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

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

FOR LINE NUMBER:
(check only one)

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<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)

Office and Professional Employees International Union - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)
DURHON RENAH R OLDHAM

Mailing Address 1995 HARRIS RD

City PENFIELD State NY Zip Code 14526

Purpose of Disbursement
Never cashed

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2007
 Primary General
 Other (specify) ▼

F

Transaction ID: D271

Date of Disbursement

08 / 15 / 2007

Amount of Each Disbursement this Period

-446.22

SUBTOTAL of Disbursements This Page (optional)

-446.22

TOTAL This Period (last page this line number only)

-446.22

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A.

Full Name (Last, First, Middle Initial)

ELIOT SPITZER

Transaction ID: D290

Date of Disbursement

^M 1	^M 0	/	^D 0	^D 1	/	^Y 2	^Y 0	^Y 0	^Y 7
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

Mailing Address 895 Broadway
5th Floor

City State Zip Code
New York City NY 10003

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Governor - NY State

011
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2007
 Primary General
 Other (specify) ▼

State: NY District:

O

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00
