

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 01 01 2009 through 06 30 2009

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 07 20 2009

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	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		246225.66
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	246225.66									
(c) Total Receipts (from Line 19)	163935.30	163935.30								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	410160.96	410160.96								
7. Total Disbursements (from Line 31)	100306.78	100306.78								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	309854.18	309854.18								
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)	5000.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Office and Professional Employees International Union - Voice of the Electorate

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	85697.03	202315.03
(ii) Unitemized	68275.11	180552.86
(iii) TOTAL (add Lines 11(a)(i) and (ii)	153972.14	153972.14
(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)	153972.14	153972.14
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	9963.16	9963.16
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))	163935.30	163935.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	163935.30	163935.30

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	22550.00	22550.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	22550.00	22550.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	79250.00	79250.00
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	-1243.22	-1243.22
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	-500.00	-500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	-1743.22	-1743.22
29. Other Disbursements.....	250.00	250.00
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))..	100306.78	100306.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	100306.78	100306.78

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	153972.14	153972.14
34. Total Contribution Refunds (from Line 28(d))	-1743.22	-1743.22
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	155715.36	155715.36
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	22550.00	22550.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	22550.00	22550.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 101
(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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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

Mailing Address 23514 P St

City State Zip Code
Elkhorn NE 68022

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 ▼ 700.00

Date of Receipt
MM / DD / YYYY
01 / 05 / 2009

Transaction ID: C152741

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
John R Akers

Mailing Address 23514 P St

City State Zip Code
Elkhorn NE 68022

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 ▼ 700.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: C160199

Amount of Each Receipt this Period
400.00

C.

Full Name (Last, First, Middle Initial)
Walter Allen

Mailing Address 7419 Cuvier St

City State Zip Code
La Jolla CA 92037

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

Name of Employer OPEIU, LOCAL NO.30 Occupation Executive Director/Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2009

Transaction ID: C155993

Amount of Each Receipt this Period
50.00

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 7 / 101
(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)
Walter Allen

Mailing Address 7419 Cuvier St

City State Zip Code
La Jolla CA 92037

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

Name of Employer Occupation
OPEIU, LOCAL NO.30 Executive Director/Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
MM / DD / YYYY
02 / 23 / 2009

Transaction ID: C158467

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Walter Allen

Mailing Address 7419 Cuvier St

City State Zip Code
La Jolla CA 92037

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

Name of Employer Occupation
OPEIU, LOCAL NO.30 Executive Director/Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: C161971

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Walter Allen

Mailing Address 7419 Cuvier St

City State Zip Code
La Jolla CA 92037

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

Name of Employer Occupation
OPEIU, LOCAL NO.30 Executive Director/Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
MM / DD / YYYY
04 / 22 / 2009

Transaction ID: C164806

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **130.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 101
	<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)
Walter Allen

Mailing Address 7419 Cuvier St

City State Zip Code
La Jolla CA 92037

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

Name of Employer Occupation
OPEIU, LOCAL NO.30 Executive Director/Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
MM / DD / YYYY
05 / 20 / 2009

Transaction ID: C165333

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Walter Allen

Mailing Address 7419 Cuvier St

City State Zip Code
La Jolla CA 92037

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

Name of Employer Occupation
OPEIU, LOCAL NO.30 Executive Director/Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
MM / DD / YYYY
05 / 21 / 2009

Transaction ID: C165348

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Walter Allen

Mailing Address 7419 Cuvier St

City State Zip Code
La Jolla CA 92037

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

Name of Employer Occupation
OPEIU, LOCAL NO.30 Executive Director/Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
MM / DD / YYYY
06 / 25 / 2009

Transaction ID: C171733

Amount of Each Receipt this Period
45.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 101
(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)
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 ▼ 2898.00
Date of Receipt 01 / 05 / 2009
Transaction ID: C151680
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 ▼ 2898.00
Date of Receipt 03 / 26 / 2009
Transaction ID: C161122
Amount of Each Receipt this Period 1656.00

C. Full Name (Last, First, Middle Initial)
RICK ALTIG Jr
Mailing Address 15440 BEL-RED RD
City State Zip Code
REDMOND WA 98052
FEC ID number of contributing federal political committee. **C**
Name of Employer American Income Life Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00
Date of Receipt 01 / 05 / 2009
Transaction ID: C151556
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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 101
(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)
RICK ALTIG Jr
Mailing Address 15440 BEL-RED RD
City REDMOND State WA Zip Code 98052
FEC ID number of contributing federal political committee. **C**
Name of Employer American Income Life Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2912.00
Date of Receipt 03 / 26 / 2009
Transaction ID: C161123
Amount of Each Receipt this Period 1664.00

B. Full Name (Last, First, Middle Initial)
Simon A Arias
Mailing Address 1200 Parkview Ln
City Broadview Heights State OH Zip Code 44147
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 ▼ 700.00
Date of Receipt 01 / 05 / 2009
Transaction ID: C152594
Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Simon A Arias
Mailing Address 1200 Parkview Ln
City Broadview Heights State OH Zip Code 44147
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 ▼ 700.00
Date of Receipt 03 / 26 / 2009
Transaction ID: C160510
Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional) ► 2364.00
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 11 / 101
(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)
James Bailey

Mailing Address 367 ADAMS DAIRY PRKWY

City State Zip Code
BLUE SPRINGS MO 64014

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 ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C151844

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
James Bailey

Mailing Address 367 ADAMS DAIRY PRKWY

City State Zip Code
BLUE SPRINGS MO 64014

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 ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C160038

Amount of Each Receipt this Period
400.00

C.

Full Name (Last, First, Middle Initial)
Susan L Bergh

Mailing Address 5653 Columbia Rd #202

City State Zip Code
Columbia MD 21044

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

Name of Employer AMERICAN INCOME LIFE INSURANCE Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C152910

Amount of Each Receipt this Period
50.00

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 12 / 101

(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)

Susan L Bergh

Mailing Address 5653 Columbia Rd #202

City State Zip Code
Columbia MD 21044

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

Name of Employer
AMERICAN INCOME LIFE INSURANCE

Occupation
Insurance Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C159891

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Yaroslav Bitman

Mailing Address 4704 Saratoga Falls Ln

City State Zip Code
Raleigh NC 27614

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

Name of Employer
American Income Life

Occupation
Insurance Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C152030

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Yaroslav Bitman

Mailing Address 4704 Saratoga Falls Ln

City State Zip Code
Raleigh NC 27614

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

Name of Employer
American Income Life

Occupation
Insurance Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C160129

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

900.00

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 13 / 101
(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)
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 ▼ 700.00
Date of Receipt 01 / 05 / 2009
Transaction ID: C152258
Amount of Each Receipt this Period 300.00

B. 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 ▼ 700.00
Date of Receipt 03 / 26 / 2009
Transaction ID: C161174
Amount of Each Receipt this Period 400.00

C. Full Name (Last, First, Middle Initial)
David W Brister
Mailing Address 105 WILLOW OAK LN
City MULLICAN HILLS State NJ Zip Code 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 ▼ 280.00
Date of Receipt 01 / 05 / 2009
Transaction ID: C151585
Amount of Each Receipt this Period 120.00

SUBTOTAL of Receipts This Page (optional) ▶ 820.00
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 / 101
	(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) David W Brister		Date of Receipt MM / DD / YYYY 03 / 26 / 2009		
	Mailing Address 105 WILLOW OAK LN		Transaction ID: C160239		
	City MULLICAN HILLS	State NJ	Zip Code 08062	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	Aggregate Year-to-Date 280.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Tod Brown		Date of Receipt MM / DD / YYYY 01 / 05 / 2009		
	Mailing Address 6674 Blackthorn Dr Apt H		Transaction ID: C152156		
	City Indianapolis	State IN	Zip Code 46220	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	Aggregate Year-to-Date 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Tod Brown		Date of Receipt MM / DD / YYYY 03 / 26 / 2009		
	Mailing Address 6674 Blackthorn Dr Apt H		Transaction ID: C159686		
	City Indianapolis	State IN	Zip Code 46220	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Insurance Agent	Aggregate Year-to-Date 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	510.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 15 / 101

(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) David Cohen		Date of Receipt
	Mailing Address 5700 WILSHIRE BLVD STE 480		<input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	LOS ANGELES	CA	90036
	FEC ID number of contributing federal political committee.		Transaction ID: C151683
		Amount of Each Receipt this Period	<input type="text" value="450.00"/>
Name of Employer American Income Life		Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1050.00"/>

B.	Full Name (Last, First, Middle Initial) David Cohen		Date of Receipt
	Mailing Address 5700 WILSHIRE BLVD STE 480		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	LOS ANGELES	CA	90036
	FEC ID number of contributing federal political committee.		Transaction ID: C158946
		Amount of Each Receipt this Period	<input type="text" value="600.00"/>
Name of Employer American Income Life		Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1050.00"/>

C.	Full Name (Last, First, Middle Initial) Micah A. COHEN		Date of Receipt
	Mailing Address 5700 WILSHIRE BLVD STE 480		<input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	LOS ANGELES	CA	90036
	FEC ID number of contributing federal political committee.		Transaction ID: C151682
		Amount of Each Receipt this Period	<input type="text" value="450.00"/>
Name of Employer American Income Life		Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1050.00"/>

SUBTOTAL of Receipts This Page (optional)

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 16 / 101
(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)
Micah A. COHEN

Mailing Address 5700 WILSHIRE BLVD STE 480

City State Zip Code
LOS ANGELES CA 90036

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

Name of Employer American Income Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2009

Transaction ID: C158947

Amount of Each Receipt this Period
600.00

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 ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 05 / 2009

Transaction ID: C151727

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 ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2009

Transaction ID: C161070

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00

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 / 101
(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)
Demario M Cooper

Mailing Address 2624 LAUREL CHERRY ST

City State Zip Code
RALEIGH NC 27612

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 ▼ 1840.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C151864

Amount of Each Receipt this Period
1200.00

B.

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

Mailing Address 2624 LAUREL CHERRY ST

City State Zip Code
RALEIGH NC 27612

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 ▼ 1840.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C160114

Amount of Each Receipt this Period
640.00

C.

Full Name (Last, First, Middle Initial)
BRANDON CORKINS

Mailing Address 1303 HEATHERWOOD DR #3B

City State Zip Code
GRAND BLANC MI 48439

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 ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C151663

Amount of Each Receipt this Period
120.00

SUBTOTAL of Receipts This Page (optional) ► 1960.00

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 / 101
(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

Mailing Address 1303 HEATHERWOOD DR #3B

City State Zip Code
GRAND BLANC MI 48439

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 ▼ 280.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: C159930

Amount of Each Receipt this Period
160.00

B.

Full Name (Last, First, Middle Initial)
Edward Darcy, Sr

Mailing Address 10000 NW 22ND ST

City State Zip Code
PEMBROKE PINES FL 33026

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

Name of Employer OPEIU Occupation Reg. Dir. State of FL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 343.15

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: C158541

Amount of Each Receipt this Period
19.23

C.

Full Name (Last, First, Middle Initial)
Edward Darcy, Sr

Mailing Address 10000 NW 22ND ST

City State Zip Code
PEMBROKE PINES FL 33026

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

Name of Employer OPEIU Occupation Reg. Dir. State of FL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 343.15

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: C158542

Amount of Each Receipt this Period
19.23

SUBTOTAL of Receipts This Page (optional) ► **198.46**

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 / 101
(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)
Edward Darcy, Sr

Mailing Address 10000 NW 22ND ST

City State Zip Code
PEMBROKE PINES FL 33026

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

Name of Employer Occupation
OPEIU Reg. Dir. State of FL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 343.15

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 8 / 2 0 0 9

Transaction ID: C164652

Amount of Each Receipt this Period
19.23

B.

Full Name (Last, First, Middle Initial)
Edward Darcy, Sr

Mailing Address 10000 NW 22ND ST

City State Zip Code
PEMBROKE PINES FL 33026

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

Name of Employer Occupation
OPEIU Reg. Dir. State of FL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 343.15

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 5 / 2 0 0 9

Transaction ID: C165201

Amount of Each Receipt this Period
19.23

C.

Full Name (Last, First, Middle Initial)
Edward Darcy, Sr

Mailing Address 10000 NW 22ND ST

City State Zip Code
PEMBROKE PINES FL 33026

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

Name of Employer Occupation
OPEIU Reg. Dir. State of FL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 343.15

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: C168410

Amount of Each Receipt this Period
166.23

SUBTOTAL of Receipts This Page (optional) ► 204.69

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 / 101
(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)
Edward Darcy, Sr
Mailing Address 10000 NW 22ND ST
City State Zip Code
PEMBROKE PINES FL 33026
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
OPEIU Reg. Dir. State of FL
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 343.15
Date of Receipt: 06 / 19 / 2009
Transaction ID: C171682
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Cara A Defiore
Mailing Address 4624 Terrang Trl
City State Zip Code
Machesney Park IL 61115
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
AMERICAN INCOME LIFE INSURANCE Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00
Date of Receipt: 01 / 05 / 2009
Transaction ID: C152866
Amount of Each Receipt this Period: 120.00

C. Full Name (Last, First, Middle Initial)
Cara A Defiore
Mailing Address 4624 Terrang Trl
City State Zip Code
Machesney Park IL 61115
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
AMERICAN INCOME LIFE INSURANCE Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00
Date of Receipt: 03 / 26 / 2009
Transaction ID: C159645
Amount of Each Receipt this Period: 160.00

SUBTOTAL of Receipts This Page (optional) ► 380.00
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 / 101
(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) Narinder Dhillon		Date of Receipt MM / DD / YYYY 01 / 05 / 2009
Mailing Address 637 BRODERICK DR NE		Transaction ID: C152497
City CEDAR RAPIDS	State IA	Zip Code 52402
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 ▼ 700.00	

B.

Full Name (Last, First, Middle Initial) Narinder Dhillon		Date of Receipt MM / DD / YYYY 03 / 26 / 2009
Mailing Address 637 BRODERICK DR NE		Transaction ID: C159539
City CEDAR RAPIDS	State IA	Zip Code 52402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

C.

Full Name (Last, First, Middle Initial) Joseph A Diecedue, III		Date of Receipt MM / DD / YYYY 01 / 05 / 2009
Mailing Address 125 Grand Falls		Transaction ID: C152605
City Conway	State AR	Zip Code 72032
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer AMERICAN INCOME LIFE INSURANCE	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
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 / 101

(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)

Joseph A Diecedue, III

Mailing Address 125 Grand Falls

City State Zip Code
Conway AR 72032

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

Name of Employer
AMERICAN INCOME LIFE INSURANCE

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: C158794

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Barry F Dillah

Mailing Address 4350 STONECREST DR

City State Zip Code
ELLIOTT CITY MD 21043

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 ▼
700.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 05 / 2009

Transaction ID: C152006

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Barry F Dillah

Mailing Address 4350 STONECREST DR

City State Zip Code
ELLIOTT CITY MD 21043

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 ▼
700.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: C159822

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

1000.00

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 23 / 101
(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)
DESISLAVA DIMITROVA

Mailing Address 2840 S DIAMOND BAR BLVD #48

City State Zip Code
DIAMOND BAR CA 91765

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 ▼ 350.00

Date of Receipt MM / DD / YYYY
01 / 05 / 2009

Transaction ID: C151878

Amount of Each Receipt this Period 150.00

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

Mailing Address 2840 S DIAMOND BAR BLVD #48

City State Zip Code
DIAMOND BAR CA 91765

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 ▼ 350.00

Date of Receipt MM / DD / YYYY
03 / 26 / 2009

Transaction ID: C158913

Amount of Each Receipt this Period 200.00

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

Mailing Address 4533 WATERFORD WAY

City State Zip Code
OAKLEY CA 94561

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

Name of Employer American Income Life Insurance Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt MM / DD / YYYY
03 / 26 / 2009

Transaction ID: C159151

Amount of Each Receipt this Period 800.00

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 24 / 101
(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) Donald Foti		Date of Receipt MM / DD / YYYY 01 / 05 / 2009
Mailing Address 4071 PORT CHICAGO HWY ST 200		Transaction ID: C152524
City CONCORD	State CA	Zip Code 94520
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	

B.

Full Name (Last, First, Middle Initial) Donald Foti		Date of Receipt MM / DD / YYYY 03 / 26 / 2009
Mailing Address 4071 PORT CHICAGO HWY ST 200		Transaction ID: C158931
City CONCORD	State CA	Zip Code 94520
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00
Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	

C.

Full Name (Last, First, Middle Initial) Cindy Furer		Date of Receipt MM / DD / YYYY 01 / 05 / 2009
Mailing Address 5677 Oberlin Dr Ste 210		Transaction ID: C152911
City San Diego	State CA	Zip Code 92121
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
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 ▼ 1350.00	

SUBTOTAL of Receipts This Page (optional)	2150.00
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 / 101
(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 5677 Oberlin Dr Ste 210
City San Diego State CA Zip Code 92121
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 ▼ 1350.00
Date of Receipt 03 / 26 / 2009
Transaction ID: C158945
Amount of Each Receipt this Period 600.00

B. Full Name (Last, First, Middle Initial)
Eric Giglione
Mailing Address 2 CHELSEA AVE
City LONG BRANCH State NJ Zip Code 07740
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 ▼ 3443.22
Date of Receipt 01 / 05 / 2009
Transaction ID: C151784
Amount of Each Receipt this Period 1200.00

C. Full Name (Last, First, Middle Initial)
Eric Giglione
Mailing Address 2 CHELSEA AVE
City LONG BRANCH State NJ Zip Code 07740
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 ▼ 3443.22
Date of Receipt 03 / 26 / 2009
Transaction ID: C160240
Amount of Each Receipt this Period 1600.00

SUBTOTAL of Receipts This Page (optional) ► 3400.00
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 / 101
(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)
Carl Michael Goodwin
Mailing Address 54 E Pierrepont Ave

City Rutherford State NJ Zip Code 07070-2331

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

Name of Employer OPEIU Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: MM / DD / YYYY
03 / 06 / 2009

Transaction ID: C158537

Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
Carl Michael Goodwin
Mailing Address 54 E Pierrepont Ave

City Rutherford State NJ Zip Code 07070-2331

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

Name of Employer OPEIU Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: MM / DD / YYYY
03 / 06 / 2009

Transaction ID: C158538

Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
Carl Michael Goodwin
Mailing Address 54 E Pierrepont Ave

City Rutherford State NJ Zip Code 07070-2331

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

Name of Employer OPEIU Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: MM / DD / YYYY
04 / 08 / 2009

Transaction ID: C164650

Amount of Each Receipt this Period 40.00

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 27 / 101
(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)
Carl Michael Goodwin

Mailing Address 54 E Pierrepont Ave

City Rutherford State NJ Zip Code 07070-2331

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

Name of Employer OPEIU Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 05 / 05 / 2009

Transaction ID: C165190

Amount of Each Receipt this Period 40.00

B.

Full Name (Last, First, Middle Initial)
Carl Michael Goodwin

Mailing Address 54 E Pierrepont Ave

City Rutherford State NJ Zip Code 07070-2331

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

Name of Employer OPEIU Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 05 / 21 / 2009

Transaction ID: C165374

Amount of Each Receipt this Period 20.00

C.

Full Name (Last, First, Middle Initial)
Carl Michael Goodwin

Mailing Address 54 E Pierrepont Ave

City Rutherford State NJ Zip Code 07070-2331

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

Name of Employer OPEIU Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 06 / 01 / 2009

Transaction ID: C168399

Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► 100.00

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 / 101
(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)
Mark R Gorman

Mailing Address 10001 COORS BLVD BYPASS NW
#1420

City State Zip Code
ALBUQUERQUE NM 87114

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 ▼ 700.00

Date of Receipt
MM / DD / YYYY
01 / 05 / 2009

Transaction ID: C151554

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mark R Gorman

Mailing Address 10001 COORS BLVD BYPASS NW
#1420

City State Zip Code
ALBUQUERQUE NM 87114

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 ▼ 700.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: C160298

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Arthur J GREENE

Mailing Address 1837 SQUIRREL VALLEY DR

City State Zip Code
BLOOMFIELD HILLS MI 48304

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

Name of Employer American Income Life Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
01 / 05 / 2009

Transaction ID: C151766

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶ **1000.00**

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 29 / 101
(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)
Arthur J GREENE
 Mailing Address 1837 SQUIRREL VALLEY DR
 City State Zip Code
 BLOOMFIELD HILLS MI 48304
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2009
Transaction ID: C159935
 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: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

B. Full Name (Last, First, Middle Initial)
Steven Greer
 Mailing Address 43 Nocturne Woods PI
 City State Zip Code
 The Woodlands TX 77382
 Date of Receipt
 M M / D D / Y Y Y Y
 01 / 05 / 2009
Transaction ID: C152856
 Amount of Each Receipt this Period
 900.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AMERICAN INCOME LIFE INSURANCE Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

C. Full Name (Last, First, Middle Initial)
Steven Greer
 Mailing Address 43 Nocturne Woods PI
 City State Zip Code
 The Woodlands TX 77382
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2009
Transaction ID: C160988
 Amount of Each Receipt this Period
 1200.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AMERICAN INCOME LIFE INSURANCE Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

SUBTOTAL of Receipts This Page (optional) ► 2500.00
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 / 101

(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)
Frederick Hadayia Jr

Mailing Address 101 IRON VALLEY DR

City State Zip Code
LEBANON PA 17042

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

Name of Employer Occupation
American Income Life Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2102.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C151563

Amount of Each Receipt this Period

900.00

B.

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

Mailing Address 101 IRON VALLEY DR

City State Zip Code
LEBANON PA 17042

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

Name of Employer Occupation
American Income Life Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2102.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C160688

Amount of Each Receipt this Period

1202.00

C.

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

Mailing Address 6284 RUCKER RD SUITE A

City State Zip Code
INDIANAPOLIS IN 46220

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 ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C151984

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

2252.00

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 31 / 101

(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 6284 RUCKER RD SUITE A

City State Zip Code
INDIANAPOLIS IN 46220

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 ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C159684

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 ▼ 2100.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C151654

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 ▼ 2100.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C159694

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 32 / 101
(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)
Robert Harris
 Mailing Address 4311 W JACKSON
 City State Zip Code
 CHICAGO IL 60624
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 0 5 / 2 0 0 9
Transaction ID: C152000
 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 ▼ 300.00

B. Full Name (Last, First, Middle Initial)
Robert Harris
 Mailing Address 826 ACTON DR
 City State Zip Code
 TOLEDO OH 43615
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 9
Transaction ID: C160519
 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 ▼ 400.00

C. Full Name (Last, First, Middle Initial)
Steve Hartman
 Mailing Address 3417 E NORWOOD CIR
 City State Zip Code
 MESA AZ 85213
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 0 5 / 2 0 0 9
Transaction ID: C151924
 Amount of Each Receipt this Period
 900.00
 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 ▼ 2100.00

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 33 / 101
(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)
Steve Hartman

Mailing Address 3417 E NORWOOD CIR

City MESA State AZ Zip Code 85213

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 ▼ 2100.00

Date of Receipt 03 / 26 / 2009

Transaction ID: C158829

Amount of Each Receipt this Period 1200.00

B.

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

Mailing Address 4405 COX RD STE 110

City GLEN ALLEN State VA Zip Code 23060

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

Name of Employer American Income Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 01 / 05 / 2009

Transaction ID: C152499

Amount of Each Receipt this Period 750.00

C.

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

Mailing Address 4405 COX RD STE 110

City GLEN ALLEN State VA Zip Code 23060

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

Name of Employer American Income Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 03 / 26 / 2009

Transaction ID: C161078

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2950.00

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 / 101

(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)
Willie Hayden

Mailing Address 10 Kingsbury Rd

City State Zip Code
Spencer MA 01562

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 ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C152549

Amount of Each Receipt this Period
90.00

B.

Full Name (Last, First, Middle Initial)
Willie Hayden

Mailing Address 10 Kingsbury Rd

City State Zip Code
Spencer MA 01562

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 ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C159785

Amount of Each Receipt this Period
120.00

C.

Full Name (Last, First, Middle Initial)
William Heath

Mailing Address 129 MILLS LN

City State Zip Code
NEW ALBANY IN 47150

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 ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C152614

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 35 / 101
(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 Heath

Mailing Address 129 MILLS LN

City State Zip Code
NEW ALBANY IN 47150

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 ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C159668

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Matt M Henderson

Mailing Address 1235 SNUG HARBOR DR

City State Zip Code
CASSELBERRY FL 32707

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 ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C151648

Amount of Each Receipt this Period
750.00

C. Full Name (Last, First, Middle Initial)
Matt M Henderson

Mailing Address 1235 SNUG HARBOR DR

City State Zip Code
CASSELBERRY FL 32707

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 ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C159377

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1950.00

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 36 / 101
(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 Hernandez

Mailing Address 350 E LAS COLINAS BLVD #1039

City State Zip Code
IRVING TX 75039

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) ▼ 700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	5	/	2	0	0	9

Transaction ID: C152780

Amount of Each Receipt this Period
300.00

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

Mailing Address 350 E LAS COLINAS BLVD #1039

City State Zip Code
IRVING TX 75039

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) ▼ 700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	9

Transaction ID: C160905

Amount of Each Receipt this Period
400.00

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

Mailing Address 245 Providence Dr

City State Zip Code
Covington GA 30016

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) ▼ 700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	5	/	2	0	0	9

Transaction ID: C152748

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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 / 101

(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)
MATTHEW HOGAN

Mailing Address 245 Providence Dr

City State Zip Code
Covington GA 30016

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 ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C159412

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)
ROBERT T HUGHES

Mailing Address 900 S Frontage Rd
Ste 105

City State Zip Code
Woodridge IL 60517

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 ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C159573

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)
Robert T Hughes

Mailing Address 1429 SENECA PL

City State Zip Code
CHARLOTTE NC 28209

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 ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C151691

Amount of Each Receipt this Period

300.00

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: PAGE 38 / 101
(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 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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	5	/	2	0	0	9

Transaction ID: C151975

Amount of Each Receipt this Period
600.00

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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	9

Transaction ID: C158930

Amount of Each Receipt this Period
800.00

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

Mailing Address 838 Louisa St
Suite A

City State Zip Code
Lansing MI 48911-5200

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

Name of Employer OPEIU Local 459 Occupation Business Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	0	9

Transaction ID: C164661

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1650.00**

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 / 101
(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 Jeffries

Mailing Address 838 Louisa St
Suite A

City State Zip Code
Lansing MI 48911-5200

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

Name of Employer Occupation
OPEIU Local 459 Business Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 04 / 2009

Transaction ID: C168487

Amount of Each Receipt this Period
20.00

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 Occupation
American Income Life Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1400.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 05 / 2009

Transaction ID: C151758

Amount of Each Receipt this Period
600.00

C. 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 Occupation
American Income Life Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1400.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2009

Transaction ID: C159265

Amount of Each Receipt this Period
800.00

SUBTOTAL of Receipts This Page (optional) ► 1420.00

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 / 101

(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)
HORACE JOHNSON

Mailing Address 12435 BLACK WATER CT

City State Zip Code
JACKSONVILLE FL 32223

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

Name of Employer Occupation
American Income Life 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
01 / 05 / 2009

Transaction ID: C151651

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
HORACE JOHNSON

Mailing Address 12435 BLACK WATER CT

City State Zip Code
JACKSONVILLE FL 32223

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

Name of Employer Occupation
American Income Life 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
03 / 26 / 2009

Transaction ID: C159378

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)
Julianna M Jones

Mailing Address 331 Kendig Dr

City State Zip Code
Owings Mills MD 21045

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

Name of Employer Occupation
AMERICAN INCOME LIFE INSURANCE 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
01 / 05 / 2009

Transaction ID: C152804

Amount of Each Receipt this Period

50.00

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 41 / 101
(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)
Julianna M Jones

Mailing Address 331 Kendig Dr

City Owings Mills State MD Zip Code 21045

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

Name of Employer AMERICAN INCOME LIFE INSURANCE Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: C159876
 Amount of Each Receipt this Period: 200.00

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

Mailing Address 1137 Walpert St Apt 26

City Hayward State CA Zip Code 94541-6768

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

Name of Employer LOCAL 29 Occupation Business Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 01 / 16 / 2009
Transaction ID: C153698
 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 Hayward State CA Zip Code 94541-6768

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

Name of Employer LOCAL 29 Occupation Business Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: C158516
 Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ► 290.00

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 / 101
(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) Terry Keller		Date of Receipt MM / DD / YYYY 03 / 16 / 2009
Mailing Address 1137 Walpert St Apt 26		Transaction ID: C158656
City Hayward	State Zip Code CA 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	Aggregate Year-to-Date ▼ 270.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Terry Keller		Date of Receipt MM / DD / YYYY 04 / 17 / 2009
Mailing Address 1137 Walpert St Apt 26		Transaction ID: C164717
City Hayward	State Zip Code CA 94541-6768	
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	Aggregate Year-to-Date ▼ 270.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Terry Keller		Date of Receipt MM / DD / YYYY 05 / 15 / 2009
Mailing Address 1137 Walpert St Apt 26		Transaction ID: C165279
City Hayward	State Zip Code CA 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	Aggregate Year-to-Date ▼ 270.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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 43 / 101

(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

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 Occupation
LOCAL 29 Business Rep

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 0 9

Transaction ID: C165341

Amount of Each Receipt this Period

10.00

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 Occupation
LOCAL 29 Business Rep

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: C171270

Amount of Each Receipt this Period

40.00

C.

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

Mailing Address 24324 LYNWOOD DR

City State Zip Code
NOVI MI 48374

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

Name of Employer Occupation
American Income Life 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
0 1 / 0 5 / 2 0 0 9

Transaction ID: C151849

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

350.00

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 / 101
	<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) STEVEN KING	Date of Receipt MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 24324 LYNWOOD DR	Transaction ID: C159941
	City State Zip Code NOVI MI 48374	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 ▼ 700.00

B.	Full Name (Last, First, Middle Initial) Adam Kiss	Date of Receipt MM / DD / YYYY 01 / 05 / 2009
	Mailing Address 89 HIGHLAND AVE	Transaction ID: C152241
	City State Zip Code EASTCHESTER NY 10709	Amount of Each Receipt this Period 150.00
	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 ▼ 350.00

C.	Full Name (Last, First, Middle Initial) Adam Kiss	Date of Receipt MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 89 HIGHLAND AVE	Transaction ID: C160499
	City State Zip Code EASTCHESTER NY 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 ▼ 350.00

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 45 / 101
(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) SCOTT LATTA		Date of Receipt MM / DD / YYYY 01 / 05 / 2009
Mailing Address 5603 W 125TH ST		Transaction ID: C151866
City OVERLAND PARK	State KS	Zip Code 66209
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 ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) SCOTT LATTA		Date of Receipt MM / DD / YYYY 03 / 26 / 2009
Mailing Address 5603 W 125TH ST		Transaction ID: C159742
City OVERLAND PARK	State KS	Zip Code 66209
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) Patricia G Lee		Date of Receipt MM / DD / YYYY 01 / 05 / 2009
Mailing Address 6809 JAKE BARNS CT		Transaction ID: C152161
City JOHNSTON	State IA	Zip Code 50131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
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 ▼ 700.00	

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 46 / 101
(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 G Lee

Mailing Address 6809 JAKE BARNES CT

City JOHNSTON State IA Zip Code 50131

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 ▼ 700.00

Date of Receipt 03 / 26 / 2009

Transaction ID: C159535

Amount of Each Receipt this Period 400.00

B. Full Name (Last, First, Middle Initial)
Tina Marie Littleton

Mailing Address 2619 Dalton Ave

City Los Angeles State CA Zip Code 90018-2725

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

Name of Employer OPEIU LOCAL NO. 537 Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 01 / 05 / 2009

Transaction ID: C153690

Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
Tina Marie Littleton

Mailing Address 2619 Dalton Ave

City Los Angeles State CA Zip Code 90018-2725

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

Name of Employer OPEIU LOCAL NO. 537 Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 02 / 02 / 2009

Transaction ID: C155940

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 490.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 101
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Tina Marie Littleton

Mailing Address 2619 Dalton Ave

City State Zip Code
Los Angeles CA 90018-2725

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

Name of Employer Occupation
OPEIU LOCAL NO. 537 Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: C158526

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Tina Marie Littleton

Mailing Address 2619 Dalton Ave

City State Zip Code
Los Angeles CA 90018-2725

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

Name of Employer Occupation
OPEIU LOCAL NO. 537 Vice President

Receipt For: 2009 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: C161865

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Tina Marie Littleton

Mailing Address 2619 Dalton Ave

City State Zip Code
Los Angeles CA 90018-2725

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

Name of Employer Occupation
OPEIU LOCAL NO. 537 Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
05 / 21 / 2009

Transaction ID: C165365

Amount of Each Receipt this Period
10.00

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 48 / 101
(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)
Tina Marie Littleton

Mailing Address 2619 Dalton Ave

City State Zip Code
Los Angeles CA 90018-2725

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

Name of Employer Occupation
OPEIU LOCAL NO. 537 Vice President

Receipt For: 2009
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
MM / DD / YYYY
05 / 29 / 2009

Transaction ID: C168398

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Tina Marie Littleton

Mailing Address 2619 Dalton Ave

City State Zip Code
Los Angeles CA 90018-2725

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

Name of Employer Occupation
OPEIU LOCAL NO. 537 Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2009

Transaction ID: C171741

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Joe Manone

Mailing Address N89 W15883 MAIN ST
Suite 101

City State Zip Code
MENOMONEE FALLS WI 53051

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 ▼
2100.00

Date of Receipt
MM / DD / YYYY
01 / 05 / 2009

Transaction ID: C152280

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: (check only one)	PAGE 49 / 101
	<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) Joe Manone	Date of Receipt MM / DD / YYYY 03 / 26 / 2009
	Mailing Address N89 W15883 MAIN ST Suite 101	Transaction ID: C161175
	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 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 ▼ 2100.00

B.	Full Name (Last, First, Middle Initial) Rick Mansfield	Date of Receipt MM / DD / YYYY 01 / 05 / 2009
	Mailing Address 11230 W Meadowriver Dr	Transaction ID: C151609
	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 ▼ 560.00

C.	Full Name (Last, First, Middle Initial) Rick Mansfield	Date of Receipt MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 11230 W Meadowriver Dr	Transaction ID: C159559
	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 ▼ 560.00

SUBTOTAL of Receipts This Page (optional)	▶	1760.00
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 / 101

(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)

Tim R McAdams

Mailing Address 3909 NORWAY LN

City State Zip Code
BOWIE MD 20716

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 ▼ **700.00**

Date of Receipt

M M / D D / Y Y Y Y
01 / 05 / 2009

Transaction ID: C151966

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Tim R McAdams

Mailing Address 3909 NORWAY LN

City State Zip Code
BOWIE MD 20716

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 ▼ **700.00**

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: C159820

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

John McCreary

Mailing Address 4537 Cove Dr
Apt B

City State Zip Code
Carlsbad CA 92008

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 ▼ **350.00**

Date of Receipt

M M / D D / Y Y Y Y
01 / 05 / 2009

Transaction ID: C152017

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: PAGE 51 / 101
(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

Mailing Address 4537 Cove Dr
Apt B

City Carlsbad State CA Zip Code 92008

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 ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: C158934

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Carla Miller

Mailing Address 751 JACOBS MILL POND RD #814

City ELGIN State SC Zip Code 29045

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

Name of Employer American Income Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
01 / 05 / 2009

Transaction ID: C152498

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Carla Miller

Mailing Address 751 JACOBS MILL POND RD #814

City ELGIN State SC Zip Code 29045

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

Name of Employer American Income Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: C160781

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► 900.00

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 52 / 101
(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)
Darren K Miller

Mailing Address 1009 Greig Trail

City Stoughton State WI Zip Code 53589

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 ▼ 700.00

Date of Receipt: 01 / 05 / 2009
Transaction ID: C152553
 Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Darren K Miller

Mailing Address 1009 Greig Trail

City Stoughton State WI Zip Code 53589

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 ▼ 700.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: C161164
 Amount of Each Receipt this Period 400.00

C. 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 ▼ 280.00

Date of Receipt: 01 / 05 / 2009
Transaction ID: C152262
 Amount of Each Receipt this Period 120.00

SUBTOTAL of Receipts This Page (optional) ► **820.00**

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 / 101
(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 ▼ 280.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: C159928
 Amount of Each Receipt this Period: 160.00

B.

Full Name (Last, First, Middle Initial)
Travis P Moody

Mailing Address 509 Mallard Creek Rd

City Louisville State KY Zip Code 40207

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 ▼ 700.00

Date of Receipt: 01 / 05 / 2009
Transaction ID: C152891
 Amount of Each Receipt this Period: 300.00

C.

Full Name (Last, First, Middle Initial)
Travis P Moody

Mailing Address 509 Mallard Creek Rd

City Louisville State KY Zip Code 40207

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 ▼ 700.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: C159751
 Amount of Each Receipt this Period: 400.00

SUBTOTAL of Receipts This Page (optional) ► **860.00**

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 / 101
(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 ▼ 350.00
Date of Receipt 01 / 05 / 2009
Transaction ID: C151930
Amount of Each Receipt this Period 150.00

B. 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 ▼ 350.00
Date of Receipt 03 / 26 / 2009
Transaction ID: C159370
Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Eric J Neal
Mailing Address 1355 Woodside Dr
City Arnold State MO Zip Code 63010
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 ▼ 2100.00
Date of Receipt 01 / 05 / 2009
Transaction ID: C152639
Amount of Each Receipt this Period 900.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00
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 / 101
(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)
Eric J Neal

Mailing Address 1355 Woodside Dr

City State Zip Code
Arnold MO 63010

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

Name of Employer American Income Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: C160035

Amount of Each Receipt this Period
1200.00

B.

Full Name (Last, First, Middle Initial)
ALFRED O'CONNOR

Mailing Address 4626 Manitou Bay

City State Zip Code
San Antonio TX 78259

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 ▼ 700.00

Date of Receipt
MM / DD / YYYY
01 / 05 / 2009

Transaction ID: C152867

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
ALFRED O'CONNOR

Mailing Address 4626 Manitou Bay

City State Zip Code
San Antonio TX 78259

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 ▼ 700.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: C160911

Amount of Each Receipt this Period
400.00

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: PAGE 56 / 101
(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)
DURHON RENA R OLDHAM

Mailing Address 1995 HARRIS RD

City State Zip Code
PENFIELD NY 14526

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 ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C151783

Amount of Each Receipt this Period
1200.00

B.

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

Mailing Address 1995 HARRIS RD

City State Zip Code
PENFIELD NY 14526

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 ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C160412

Amount of Each Receipt this Period
1200.00

C.

Full Name (Last, First, Middle Initial)
ROBERT OLSON, Jr

Mailing Address 26561 W HIGHLAND DR

City State Zip Code
CHANNAHON IL 60410

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

Name of Employer American Income Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2800.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C151865

Amount of Each Receipt this Period
1200.00

SUBTOTAL of Receipts This Page (optional) ► **3600.00**

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 57 / 101
(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)
ROBERT OLSON, Jr
Mailing Address 26561 W HGHLAND DR
City CHANNAHON State IL Zip Code 60410
FEC ID number of contributing federal political committee. **C**
Name of Employer American Income Life Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2800.00
Date of Receipt 03 / 26 / 2009
Transaction ID: C159590
Amount of Each Receipt this Period 1600.00

B. Full Name (Last, First, Middle Initial)
MICHAEL P O'ROURKE
Mailing Address 1935 KESHA CT
City PACIFIC State MO Zip Code 63069
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 ▼ 280.00
Date of Receipt 01 / 05 / 2009
Transaction ID: C151777
Amount of Each Receipt this Period 120.00

C. Full Name (Last, First, Middle Initial)
MICHAEL P O'ROURKE
Mailing Address 1935 KESHA CT
City PACIFIC State MO Zip Code 63069
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 ▼ 280.00
Date of Receipt 03 / 26 / 2009
Transaction ID: C160036
Amount of Each Receipt this Period 160.00

SUBTOTAL of Receipts This Page (optional) ► 1880.00
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 58 / 101
(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 J Orrico
Mailing Address 1018 SCARLET OAK LN
City State Zip Code
MANDEVILLE LA 70448
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 ▼ 350.00
Date of Receipt 01 / 05 / 2009
Transaction ID: C151569
Amount of Each Receipt this Period 150.00

B. Full Name (Last, First, Middle Initial)
David J Orrico
Mailing Address 1018 SCARLET OAK LN
City State Zip Code
MANDEVILLE LA 70448
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 ▼ 350.00
Date of Receipt 03 / 26 / 2009
Transaction ID: C159766
Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Michael Pope
Mailing Address 3710 TOLLAND ROAD
City State Zip Code
SHAKER HEIGHTS OH 44122
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 ▼ -260.00
Date of Receipt 01 / 05 / 2009
Transaction ID: C151780
Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional) ▶ 410.00
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 59 / 101
(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
							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) Michael Pope		Date of Receipt MM / DD / YYYY 03 / 26 / 2009
Mailing Address 3710 TOLLAND ROAD		Transaction ID: C160544
City SHAKER HEIGHTS	State OH	Zip Code 44122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -320.00
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 ▼ -260.00	

B.

Full Name (Last, First, Middle Initial) Phillip R Pope		Date of Receipt MM / DD / YYYY 04 / 08 / 2009
Mailing Address 110 Greenbriar Drive		Transaction ID: C164662
City Knoxville	State TN	Zip Code 37919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer OPEIU Local #2001	Occupation President	
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) Patricia Priloh		Date of Receipt MM / DD / YYYY 03 / 06 / 2009
Mailing Address 303 Diamond Ave		Transaction ID: C158546
City Brownsville	State PA	Zip Code 15417-8645
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer OPEIU	Occupation Vice President/Int'l Rep.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.00	

SUBTOTAL of Receipts This Page (optional)	-40.00
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 / 101
(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)
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/Int'l Rep.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: C158545

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/Int'l Rep.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
MM / DD / YYYY
04 / 08 / 2009

Transaction ID: C164654

Amount of Each Receipt this Period
280.00

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 Occupation
OPEIU Vice President/Int'l Rep.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2009

Transaction ID: C165195

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **340.00**

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 / 101
(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/Int'l Rep.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
MM / DD / YYYY
06 / 01 / 2009

Transaction ID: C168404

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/Int'l Rep.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2009

Transaction ID: C168484

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Scott J Rehberg

Mailing Address 1153 Thistle Ln

City State Zip Code
Lebanon OH 45036

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

Name of Employer Occupation
American Income Life Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
MM / DD / YYYY
01 / 05 / 2009

Transaction ID: C152589

Amount of Each Receipt this Period
240.00

SUBTOTAL of Receipts This Page (optional) ► **280.00**

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 62 / 101
	<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 J Rehberg		Date of Receipt MM / DD / YYYY 03 / 26 / 2009		
	Mailing Address 1153 Thistle Ln		Transaction ID: C160526		
	City Lebanon	State OH	Zip Code 45036	Amount of Each Receipt this Period 320.00	
	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 ▼
560.00

B.	Full Name (Last, First, Middle Initial) Jeff S Ribman		Date of Receipt MM / DD / YYYY 01 / 05 / 2009		
	Mailing Address 333 1St St Apt E119		Transaction ID: C152807		
	City Seal Beach	State CA	Zip Code 90740	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 ▼
700.00

C.	Full Name (Last, First, Middle Initial) Jeff S Ribman		Date of Receipt MM / DD / YYYY 03 / 26 / 2009		
	Mailing Address 333 1St St Apt E119		Transaction ID: C158923		
	City Seal Beach	State CA	Zip Code 90740	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 ▼
700.00

SUBTOTAL of Receipts This Page (optional)	▶	1020.00
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 / 101
(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)
Marc E Rosen

Mailing Address 96 Rivington Ave

City Staten Island State NY Zip Code 10314

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

Name of Employer National Income Life Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 01 / 05 / 2009
Transaction ID: C152273
Amount of Each Receipt this Period 900.00

B. Full Name (Last, First, Middle Initial)
Marc E Rosen

Mailing Address 96 Rivington Ave

City Staten Island State NY Zip Code 10314

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

Name of Employer National Income Life Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 03 / 26 / 2009
Transaction ID: C160355
Amount of Each Receipt this Period 1200.00

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

Mailing Address 8200 Haven Ave #11-211

City Rancho Cucamonga State CA Zip Code 91730

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 ▼ 280.00

Date of Receipt 01 / 05 / 2009
Transaction ID: C153001
Amount of Each Receipt this Period 120.00

SUBTOTAL of Receipts This Page (optional) ► 2220.00

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 / 101
(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)
TORRENCE ROWELL

Mailing Address 8200 Haven Ave #11-211

City Rancho Cucamonga State CA Zip Code 91730

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 ▼ 280.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: C158966
 Amount of Each Receipt this Period: 160.00

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

Mailing Address PO Box 149

City Carmichael State CA Zip Code 95609-0149

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

Name of Employer LOCAL 29 Occupation President/Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 01 / 16 / 2009
Transaction ID: C153696
 Amount of Each Receipt this Period: 50.00

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

Mailing Address PO Box 149

City Carmichael State CA Zip Code 95609-0149

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

Name of Employer LOCAL 29 Occupation President/Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: C158514
 Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ► 250.00

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 / 101
(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/Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	6	/	2	0	0	9

Transaction ID: C158654

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/Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	7	/	2	0	0	9

Transaction ID: C164715

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/Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	9

Transaction ID: C165277

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 66 / 101
(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 Carmichael State CA Zip Code 95609-0149
FEC ID number of contributing federal political committee. **C**
Name of Employer LOCAL 29 Occupation President/Business Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00
Date of Receipt 05 / 21 / 2009
Transaction ID: C165346
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Tamara Rubyn
Mailing Address PO Box 149
City Carmichael State CA Zip Code 95609-0149
FEC ID number of contributing federal political committee. **C**
Name of Employer LOCAL 29 Occupation President/Business Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00
Date of Receipt 06 / 15 / 2009
Transaction ID: C171268
Amount of Each Receipt this Period 40.00

C. 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 ▼ 2800.00
Date of Receipt 01 / 05 / 2009
Transaction ID: C151946
Amount of Each Receipt this Period 1200.00

SUBTOTAL of Receipts This Page (optional) ► 1260.00
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 / 101
(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)
Paul D Rumbuc

Mailing Address 3570 MAGNOLOIA CT

City State Zip Code
OAKLAND TOWNSHIP MI 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 ▼
2800.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: C159925

Amount of Each Receipt this Period
1600.00

B.

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

Mailing Address 344 Rock Creek Way

City State Zip Code
Pleasant Hill CA 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 ▼
270.00

Date of Receipt
MM / DD / YYYY
01 / 16 / 2009

Transaction ID: C153697

Amount of Each Receipt this Period
50.00

C.

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

Mailing Address 344 Rock Creek Way

City State Zip Code
Pleasant Hill CA 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 ▼
270.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: C158515

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **1690.00**

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 / 101

(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 Sanchez

Mailing Address 344 Rock Creek Way

City State Zip Code
Pleasant Hill CA 94523-4718

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

Name of Employer Occupation
LOCAL 29 Secretary-Treasurer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	0	9

Transaction ID: C158655

Amount of Each Receipt this Period

40.00

B.

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

Mailing Address 344 Rock Creek Way

City State Zip Code
Pleasant Hill CA 94523-4718

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

Name of Employer Occupation
LOCAL 29 Secretary-Treasurer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	0	9

Transaction ID: C164716

Amount of Each Receipt this Period

50.00

C.

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

Mailing Address 344 Rock Creek Way

City State Zip Code
Pleasant Hill CA 94523-4718

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

Name of Employer Occupation
LOCAL 29 Secretary-Treasurer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	0	9

Transaction ID: C165278

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)

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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 69 / 101
(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 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 ▼ 270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	1	/	2	0	0	9

Transaction ID: C165347

Amount of Each Receipt this Period
10.00

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 ▼ 270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	5	/	2	0	0	9

Transaction ID: C171269

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Aaron Sanders

Mailing Address 464 Grandwoods Dr

City Lansing State MI Zip Code 48917

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

Name of Employer Local 512 Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	0	9

Transaction ID: C164663

Amount of Each Receipt this Period
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 70 / 101
(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)

Aaron Sanders

Mailing Address 464 Grandwoods Dr

City State Zip Code
Lansing MI 48917

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

Name of Employer Occupation
Local 512 President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 0 9

Transaction ID: C168490

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

BETH SNOW

Mailing Address 1909 WESTOVER DR

City State Zip Code
PLEASANT HILL CA 94523

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

Name of Employer Occupation
American Income Life Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 380.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C151773

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

BETH SNOW

Mailing Address 1909 WESTOVER DR

City State Zip Code
PLEASANT HILL CA 94523

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

Name of Employer Occupation
American Income Life Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 380.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C158895

Amount of Each Receipt this Period

320.00

SUBTOTAL of Receipts This Page (optional) ▶

390.00

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 / 101
(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)
Curt D. Snow

Mailing Address 827 BUCKINGHAM PLACE

City State Zip Code
DANVILLE CA 94506

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

Name of Employer American Income Life Insurance
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	9

Transaction ID: C159231

Amount of Each Receipt this Period
320.00

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

Mailing Address 2321 HENNEPIN DR

City State Zip Code
SAINT LOUIS MO 63114

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 ▼
700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	5	/	2	0	0	9

Transaction ID: C151832

Amount of Each Receipt this Period
300.00

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

Mailing Address 2321 HENNEPIN DR

City State Zip Code
SAINT LOUIS MO 63114

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 ▼
700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	9

Transaction ID: C160026

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► **1020.00**

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 / 101

(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)
Christopher Stephens

Mailing Address 1466 SANTA TERESA DR

City State Zip Code
PITTSBURG CA 94565

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

Name of Employer
American Income Life Insurance

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: C159028

Amount of Each Receipt this Period

320.00

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
American Income Life

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2912.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 05 / 2009

Transaction ID: C152527

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
American Income Life

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2912.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: C160567

Amount of Each Receipt this Period

1664.00

SUBTOTAL of Receipts This Page (optional)

3232.00

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 / 101
(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 Terry

Mailing Address 818 Appomattox St

City Hopewell State VA Zip Code 23860

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

Name of Employer CWA Local 2201 Occupation staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.88

Date of Receipt: 01 / 06 / 2009
Transaction ID: C153692
Amount of Each Receipt this Period: 38.48

B.

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

Mailing Address 818 Appomattox St

City Hopewell State VA Zip Code 23860

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

Name of Employer CWA Local 2201 Occupation staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.88

Date of Receipt: 02 / 04 / 2009
Transaction ID: C155944
Amount of Each Receipt this Period: 38.48

C.

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

Mailing Address 818 Appomattox St

City Hopewell State VA Zip Code 23860

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

Name of Employer CWA Local 2201 Occupation staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.88

Date of Receipt: 03 / 04 / 2009
Transaction ID: C158528
Amount of Each Receipt this Period: 38.48

SUBTOTAL of Receipts This Page (optional) ► **115.44**

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 74 / 101

(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 Terry

Mailing Address 818 Appomattox St

City State Zip Code
Hopewell VA 23860

FEC ID number of contributing federal political committee. C

Name of Employer CWA Local 2201 Occupation staff

Receipt For: 2009
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.88

Date of Receipt
04 / 06 / 2009

Transaction ID: C164647

Amount of Each Receipt this Period
38.48

B.

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

Mailing Address 818 Appomattox St

City State Zip Code
Hopewell VA 23860

FEC ID number of contributing federal political committee. C

Name of Employer CWA Local 2201 Occupation staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.88

Date of Receipt
05 / 05 / 2009

Transaction ID: C165189

Amount of Each Receipt this Period
38.48

C.

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

Mailing Address 818 Appomattox St

City State Zip Code
Hopewell VA 23860

FEC ID number of contributing federal political committee. C

Name of Employer CWA Local 2201 Occupation staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.88

Date of Receipt
06 / 03 / 2009

Transaction ID: C168420

Amount of Each Receipt this Period
38.48

SUBTOTAL of Receipts This Page (optional) 115.44

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 / 101

(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)

Dustin W Venekamp

Mailing Address 751 Roosevelt Rd Ste 212

City State Zip Code
Glen Ellyn IL 60137

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 ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C152978

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Dustin W Venekamp

Mailing Address 751 Roosevelt Rd Ste 212

City State Zip Code
Glen Ellyn IL 60137

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 ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C159604

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

RODNEY WARD

Mailing Address 18944 EMIT RD

City State Zip Code
BROWNSTOWN MI 48192

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 ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C151770

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1000.00

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 / 101

(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)
RODNEY WARD

Mailing Address 18944 EMIT RD

City State Zip Code
BROWNSTOWN MI 48192

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 ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C159936

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)
Jacqueline K. White-brown

Mailing Address 128 W Olive Ave

City State Zip Code
Monrovia CA 91016-3410

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

Name of Employer Occupation
OPEIU LOCAL 537

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C153689

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
Jacqueline K. White-brown

Mailing Address 128 W Olive Ave

City State Zip Code
Monrovia CA 91016-3410

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

Name of Employer Occupation
OPEIU LOCAL 537

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 0 9

Transaction ID: C155939

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

490.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 101
(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)
Jacqueline K. White-brown
Mailing Address 128 W Olive Ave
City State Zip Code
Monrovia CA 91016-3410
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
OPEIU LOCAL 537
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt: 03 / 02 / 2009
Transaction ID: C158525
Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
Jacqueline K. White-brown
Mailing Address 128 W Olive Ave
City State Zip Code
Monrovia CA 91016-3410
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
OPEIU LOCAL 537
Receipt For: Primary General Other (specify) ▼ 2009
Aggregate Year-to-Date ▼ 350.00
Date of Receipt: 03 / 30 / 2009
Transaction ID: C161864
Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
Jacqueline K. White-brown
Mailing Address 128 W Olive Ave
City State Zip Code
Monrovia CA 91016-3410
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
OPEIU LOCAL 537
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt: 05 / 01 / 2009
Transaction ID: C165188
Amount of Each Receipt this Period 80.00

SUBTOTAL of Receipts This Page (optional) ► 160.00
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 / 101
(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)
Jacqueline K. White-brown
Mailing Address 128 W Olive Ave

City State Zip Code
Monrovia CA 91016-3410

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

Name of Employer Occupation
OPEIU LOCAL 537

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
05 / 21 / 2009

Transaction ID: C165370

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Jacqueline K. White-brown
Mailing Address 128 W Olive Ave

City State Zip Code
Monrovia CA 91016-3410

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

Name of Employer Occupation
OPEIU LOCAL 537

Receipt For: 2009 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
05 / 29 / 2009

Transaction ID: C168397

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Jacqueline K. White-brown
Mailing Address 128 W Olive Ave

City State Zip Code
Monrovia CA 91016-3410

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

Name of Employer Occupation
OPEIU LOCAL 537

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2009

Transaction ID: C171740

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► 100.00

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 / 101

(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)
Robert G Whittinghill

Mailing Address 5677 OBERLIN DR STE 210

City State Zip Code
SAN DIEGO CA 92121

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

Name of Employer
American Income Life Insurance

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C153020

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
Robert G Whittinghill

Mailing Address 5677 OBERLIN DR STE 210

City State Zip Code
SAN DIEGO CA 92121

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

Name of Employer
American Income Life Insurance

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C159185

Amount of Each Receipt this Period

600.00

C.

Full Name (Last, First, Middle Initial)
CYNTHIA WILHELMI

Mailing Address 300 45Th St Sw Ste 135

City State Zip Code
Fargo ND 58103

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 ▼
304.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C152779

Amount of Each Receipt this Period

3.00

SUBTOTAL of Receipts This Page (optional)

753.00

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 / 101
(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)
CYNTHIA WILHELMI

Mailing Address 300 45Th St Sw Ste 135

City State Zip Code
Fargo ND 58103

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) ▼ 304.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	9

Transaction ID: C160181

Amount of Each Receipt this Period
301.00

B. Full Name (Last, First, Middle Initial)
Gary D Williams

Mailing Address 531 STILLWATER DR NW

City State Zip Code
MARIETTA GA 30064

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

Name of Employer American Income Life Occupation Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	5	/	2	0	0	9

Transaction ID: C152079

Amount of Each Receipt this Period
300.00

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

Mailing Address 531 STILLWATER DR NW

City State Zip Code
MARIETTA GA 30064

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

Name of Employer American Income Life Occupation Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	9

Transaction ID: C159402

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► **1001.00**

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 / 101
(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)
Thomas Williams

Mailing Address 10246 SW 22nd PL

City State Zip Code
DAVIE FL 33324

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) ▼ 2200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	9

Transaction ID: C159375

Amount of Each Receipt this Period
1600.00

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

Mailing Address 10246 Sw 22Nd Pl

City State Zip Code
Davie FL 33324

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

Name of Employer AMERICAN INCOME LIFE INSURANCE Occupation Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	5	/	2	0	0	9

Transaction ID: C152560

Amount of Each Receipt this Period
1200.00

C. Full Name (Last, First, Middle Initial)
Judith J Zenk

Mailing Address PO Box 413

City State Zip Code
Grapeview WA 98546

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

Name of Employer OPEIU Local 23 Occupation Business Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	0	9

Transaction ID: C164664

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **3050.00**

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 / 101

(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)

David Zophin

Mailing Address 101 GROUSE HILL RD

City State Zip Code
GLASTONBURY CT 06033

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 ▼ 2800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C151561

Amount of Each Receipt this Period

1200.00

B.

Full Name (Last, First, Middle Initial)

David Zophin

Mailing Address 101 GROUSE HILL RD

City State Zip Code
GLASTONBURY CT 06033

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 ▼ 2800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C159327

Amount of Each Receipt this Period

1600.00

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

85697.03

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

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

FOR LINE NUMBER: PAGE 83 / 101
(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)
CITIBANK, F.S.B.
Mailing Address 1101 Pennsylvania Avenue, N.W.
City Washington State DC Zip Code 20004
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify)
Aggregate Year-to-Date 1873.86
Date of Receipt 01 / 01 / 2009
Transaction ID: C171241
Amount of Each Receipt this Period 309.57

B. Full Name (Last, First, Middle Initial)
CITIBANK, F.S.B.
Mailing Address 1101 Pennsylvania Avenue, N.W.
City Washington State DC Zip Code 20004
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify)
Aggregate Year-to-Date 1873.86
Date of Receipt 01 / 01 / 2009
Transaction ID: C171240
Amount of Each Receipt this Period 823.12

C. Full Name (Last, First, Middle Initial)
CITIBANK, F.S.B.
Mailing Address 1101 Pennsylvania Avenue, N.W.
City Washington State DC Zip Code 20004
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2009
 Primary General
 Other (specify)
Aggregate Year-to-Date 1873.86
Date of Receipt 05 / 31 / 2009
Transaction ID: C171242
Amount of Each Receipt this Period 676.37

SUBTOTAL of Receipts This Page (optional) ► 1809.06
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 84 / 101

(check only one)

<input 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 checked="" 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)
CITIBANK, F.S.B.

Mailing Address 1101 Pennsylvania Avenue, N.W.

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2009
 Primary General
 Other (specify) ▼
○

Aggregate Year-to-Date ▼
1873.86

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2009

Transaction ID: C171786

Amount of Each Receipt this Period

64.80

B.

Full Name (Last, First, Middle Initial)
J. B. Moss Vote (OPEIU)

Mailing Address 1660 L STREET, NW
SUITE 801

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00007898

Name of Employer Occupation

Receipt For: 2009
 Primary General
 Other (specify) ▼
○

Aggregate Year-to-Date ▼
8089.30

Date of Receipt

M M / D D / Y Y Y Y
05 / 31 / 2009

Transaction ID: C171243

Amount of Each Receipt this Period

8089.30

ADJ BAL FOR UNFOUND DIFF

SUBTOTAL of Receipts This Page (optional)

8154.10

TOTAL This Period (last page this line number only)

9963.16

B. Form/Schedule : **SA17**
Transaction ID : **C171243**

ADJUSTMENT FOR UNFOUND BALANCE DIFFERENCE WITH BANK. HAVE RESEARCHED PRIOR YEARS AND
TE. INTEREST WAS NOT ENTERED AND CONTRIBUTIONS MAY HAVE BEEN OVERSTATED.

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) FRIENDS OF CHRIS DODD	Transaction ID: D490 Date of Disbursement
	Mailing Address PO BOX 270701	<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WEST HARTFORD State CT Zip Code 06127	Amount of Each Disbursement this Period
	Purpose of Disbursement May 21st Event	<input type="text" value="2000.00"/>
	Candidate Name Chris Dodd	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) John Barrow	Transaction ID: D495 Date of Disbursement
	Mailing Address P.O. Box 8166	<input type="text" value="02"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Savannah State GA Zip Code 31412	Amount of Each Disbursement this Period
	Purpose of Disbursement GA-12th District	<input type="text" value="2500.00"/>
	Candidate Name John Barrow	<input type="text" value=""/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jim Holbert	Transaction ID: D493 Date of Disbursement
	Mailing Address 189 Clay Lucas Drive	<input type="text" value="02"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City London State KY Zip Code 40744	Amount of Each Disbursement this Period
	Purpose of Disbursement KY-Congress	<input type="text" value="1000.00"/>
	Candidate Name Jim Holbert	<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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value=""/>

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

<p>A. Full Name (Last, First, Middle Initial) Ngp Software</p> <p>Mailing Address 5505 Connecticut Ave NW # 277</p> <p>City Washington State DC Zip Code 20015-2601</p> <p>Purpose of Disbursement PAC Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District: O</p>	<p>Transaction ID: D497</p> <p>Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Opeiu Local No. 153</p> <p>Mailing Address 265 W 14th St Ste 612</p> <p>City New York State NY Zip Code 10011-7179</p> <p>Purpose of Disbursement PAC to PAC Contribution</p> <p>Candidate Name Opeiu Local No. 153</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District: O</p>	<p>Transaction ID: D498</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 4500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Van Hollen For Congress</p> <p>Mailing Address 10605 Concord St</p> <p>City Kensington State MD Zip Code 20895-2504</p> <p>Purpose of Disbursement Congress</p> <p>Candidate Name Van Hollen For Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MD District: 08</p>	<p>Transaction ID: D496</p> <p>Date of Disbursement 03 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 88 / 101

<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)

WYDEN FOR SENATE

Mailing Address 232 NE 9TH AVENUE

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement
Senatorial Campaign 2010

Candidate Name
Ronald Wyden

Office Sought: House
 Senate
 President

State: OR District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: D506

Date of Disbursement

04 / 08 / 2009

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

22500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) AL FRANKEN FOR SENATE <hr/> Mailing Address PO BOX 583144 <hr/> City MINNEAPOLIS State MN Zip Code 55458 <hr/> Purpose of Disbursement Recount Candidate Name AL FRANKEN FOR SENATE <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O	Transaction ID: D501 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O
B. Full Name (Last, First, Middle Initial) Mark Begich <hr/> Mailing Address PO Box 240287 <hr/> City Anchorage State AK Zip Code 99524 <hr/> Purpose of Disbursement Voided Check Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D485 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period -5000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign <hr/> Mailing Address 430 S Capitol St SE <hr/> City Washington State DC Zip Code 20003-4024 <hr/> Purpose of Disbursement 2009 Membership Contribution Candidate Name Democratic Congressional Campaign <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O	Transaction ID: D473 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 15000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	(Empty)

**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

<p>A. Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Comm.</p> <p>Mailing Address PO BOX 96047</p> <p>City Washington State DC Zip Code 20077</p> <p>Purpose of Disbursement 2009 Membership Contribution</p> <p>Candidate Name Democratic Senatorial Campaign Comm.</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: O</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D474 Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 15000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) FRIENDS OF SCHUMER</p> <p>Mailing Address 509 MADISON AVE SUITE 1902</p> <p>City NEW YORK State NY Zip Code 10022</p> <p>Purpose of Disbursement Breakfast with the Labor Community</p> <p>Candidate Name FRIENDS OF SCHUMER</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 00</p> <p>Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D491 Date of Disbursement 01 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) FRIENDS OF SCHUMER</p> <p>Mailing Address 509 MADISON AVE SUITE 1902</p> <p>City NEW YORK State NY Zip Code 10022</p> <p>Purpose of Disbursement 2010 General Election</p> <p>Candidate Name FRIENDS OF SCHUMER</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D494 Date of Disbursement 02 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

25000.00

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 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) Gerry Connolly	Transaction ID: D504 Date of Disbursement 03 / 17 / 2009
	Mailing Address P.O. Box 563	Amount of Each Disbursement this Period 250.00
	City Merrifield State VA Zip Code 22116	
	Purpose of Disbursement D-11th, VA Candidate Name Gerry Connolly Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

B.	Full Name (Last, First, Middle Initial) Harry Reid	Transaction ID: D492 Date of Disbursement 02 / 09 / 2009
	Mailing Address 3700 S Stonebridge Drive	Amount of Each Disbursement this Period 5000.00
	City Mc Kinney State TX Zip Code 75070	
	Purpose of Disbursement Senate Candidate Name Harry Reid Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

C.	Full Name (Last, First, Middle Initial) Harry Reid	Transaction ID: D524 Date of Disbursement 06 / 19 / 2009
	Mailing Address 3700 S Stonebridge Drive	Amount of Each Disbursement this Period 2500.00
	City Mc Kinney State TX Zip Code 75070	
	Purpose of Disbursement Majority Leader Candidate Name Harry Reid Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	7750.00
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 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

<p>A. Full Name (Last, First, Middle Initial) Jerry McNerney</p> <p>Mailing Address P.O. Box 12022</p> <p>City Pleasanton State CA Zip Code 94588</p> <p>Purpose of Disbursement Congress 11th District CA</p> <p>Candidate Name Jerry McNerney</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D507 Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type 011</p>
<p>B. Full Name (Last, First, Middle Initial) John Barrow</p> <p>Mailing Address P.O. Box 8166</p> <p>City Savannah State GA Zip Code 31412</p> <p>Purpose of Disbursement Check # 1036- VOID -never deposited</p> <p>Candidate Name John Barrow</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D419 Date of Disbursement 01 / 13 / 2009</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Kirsten Gillibrand</p> <p>Mailing Address 514 Warren Street</p> <p>City Hudson State NY Zip Code 12534</p> <p>Purpose of Disbursement May 6th Event</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D489 Date of Disbursement 05 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Category/Type</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)

<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) Kirsten Gillibrand	Transaction ID: D513 Date of Disbursement 05 / 27 / 2009
	Mailing Address 514 Warren Street	Amount of Each Disbursement this Period 3000.00
	City Hudson State NY Zip Code 12534	
	Purpose of Disbursement Senate	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kirsten Gillibrand	Transaction ID: D514 Date of Disbursement 05 / 27 / 2009
	Mailing Address 514 Warren Street	Amount of Each Disbursement this Period 2000.00
	City Hudson State NY Zip Code 12534	
	Purpose of Disbursement Senate	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kirsten Gillibrand	Transaction ID: D527 Date of Disbursement 06 / 19 / 2009
	Mailing Address 514 Warren Street	Amount of Each Disbursement this Period 3000.00
	City Hudson State NY Zip Code 12534	
	Purpose of Disbursement Senate General 2010	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	8000.00
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 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) Mark DeSaulnier	Transaction ID: D510 Date of Disbursement 05 / 19 / 2009
	Mailing Address PO Box 6066	Amount of Each Disbursement this Period 2500.00
	City Concord State CA Zip Code 94524	
	Purpose of Disbursement CA 10th Congressional District	011 Category/Type
	Candidate Name Mark DeSaulnier	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mr. Scott Murphy	Transaction ID: D502 Date of Disbursement 03 / 19 / 2009
	Mailing Address 1 Warren Street	Amount of Each Disbursement this Period 5000.00
	City Glens Falls State NY Zip Code 12801	
	Purpose of Disbursement NY District 20	011 Category/Type
	Candidate Name Scott Murphy	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) NELSON 2012	Transaction ID: D505 Date of Disbursement 04 / 08 / 2009
	Mailing Address PO BOX 8666	Amount of Each Disbursement this Period 5000.00
	City OMAHA State NE Zip Code 68108	
	Purpose of Disbursement 2012 Sentatorial Vote	001 Category/Type
	Candidate Name NELSON 2012	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: NE District: 00	

SUBTOTAL of Disbursements This Page (optional)	▶	12500.00
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 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) SESTAK FOR CONGRESS	Transaction ID: D503 Date of Disbursement
	Mailing Address P.O. Box 16	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City Media State PA Zip Code 19063	Amount of Each Disbursement this Period
	Purpose of Disbursement Congress PA, 7th	<input type="text" value="2500.00"/>
	Candidate Name Joe Sestak	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SESTAK FOR CONGRESS	Transaction ID: D526 Date of Disbursement
	Mailing Address P.O. Box 16	<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City Media State PA Zip Code 19063	Amount of Each Disbursement this Period
	Purpose of Disbursement Congress PA, 7th	<input type="text" value="500.00"/>
	Candidate Name Joe Sestak	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SESTAK FOR CONGRESS	Transaction ID: D525 Date of Disbursement
	Mailing Address P.O. Box 16	<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City Media State PA Zip Code 19063	Amount of Each Disbursement this Period
	Purpose of Disbursement Congress PA, 7th	<input type="text" value="5000.00"/>
	Candidate Name Joe Sestak	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

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 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)

STEVE ROTHMAN FOR NEW JERSEY INC.

Transaction ID: D508

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	0	9

Mailing Address P.O. Box 714

City Hackensack State NJ Zip Code 07602

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Congress 9th District

011
Category/ Type

Candidate Name
STEVE ROTHMAN FOR NEW JERSEY INC.

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NJ District: 09

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

79250.00

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" 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)

Steven Panagiotakos

Mailing Address 316 Parker Street

City Lowell State MA Zip Code 01851

Purpose of Disbursement
Senator

Candidate Name
Steven Panagiotakos

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

O

Transaction ID: D518

Date of Disbursement

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

Amount of Each Disbursement this Period

-500.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ►

-500.00

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

-500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Clint Zweifel <hr/> Mailing Address 2781 Red Cedar Parc Drive, 5 <hr/> City O'Fallon State MO Zip Code 63368 <hr/> Purpose of Disbursement MO - Treasurer Candidate Name Clint Zweifel Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: O	Transaction ID: D475 Date of Disbursement 01 / 27 / 2009 <hr/> Amount of Each Disbursement this Period 1500.00
B.	Full Name (Last, First, Middle Initial) Doug Bennett <hr/> Mailing Address PO Box 960841 <hr/> City Boston State MA Zip Code 02196 <hr/> Purpose of Disbursement City Councilor Candidate Name Doug Bennett Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D511 Date of Disbursement 05 / 19 / 2009 <hr/> Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Hillary Clinton for President <hr/> Mailing Address P.O. Box 1781 <hr/> City Merrifield State VA Zip Code 22116 <hr/> Purpose of Disbursement Voided Check Candidate Name Hillary Clinton Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: O	Transaction ID: D521 Date of Disbursement 05 / 06 / 2009 <hr/> Amount of Each Disbursement this Period -4000.00

SUBTOTAL of Disbursements This Page (optional) ▶

-2250.00

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

.....

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

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

FOR LINE NUMBER:
(check only one)

PAGE 100 / 101

<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) Tim Murray	Transaction ID: D515 Date of Disbursement 05 / 21 / 2009
	Mailing Address 23 Institute Road	
	City Worcester State MA Zip Code 01609	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement MA-Lieutenant Gov. Candidate Name Tim Murray Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Tim Murray	Transaction ID: D520 Date of Disbursement 06 / 08 / 2009
	Mailing Address 23 Institute Road	
	City Worcester State MA Zip Code 01609	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement MA-Lieutenant Gov. Candidate Name Tim Murray Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Transportation Trades Department	Transaction ID: D472 Date of Disbursement 01 / 22 / 2009
	Mailing Address AFL-CIO 888 16th Street, N.W. Suite 650	
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement TTD PAC Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	250.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 101 / 101	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

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

Outstanding Balance Beginning This Period		Transaction ID: D345	
5000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	5000.00	

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