

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

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

ADDRESS (number and street) ▼

80 Eighth Avenue, Suite 610

☐ Check if different than previously reported. (ACC)

New York

NY

10011

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00007898

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☒ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the  
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
01 01 2015

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms. Mary Mahoney

Signature of Treasurer

Ms. Mary Mahoney

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
07 15 2015

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

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

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2015</span>		<span style="border: 1px solid black; padding: 2px;">680525.40</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">680525.40</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">181505.01</span>	<span style="border: 1px solid black; padding: 2px;">181505.01</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">862030.41</span>	<span style="border: 1px solid black; padding: 2px;">862030.41</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">5285.03</span>	<span style="border: 1px solid black; padding: 2px;">5285.03</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">856745.38</span>	<span style="border: 1px solid black; padding: 2px;">856745.38</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



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

## For further information contact:

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

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

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 01 01 2015

To:

 M M / D D / Y Y Y Y Y  
 06 30 2015
**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).....

66181.76

66181.76

(ii) Unitemized .....

115095.46

115095.46

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

181277.22

181277.22

(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) .....

181277.22

181277.22

## 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.).....

227.79

227.79

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

181505.01

181505.01

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

181505.01

181505.01

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	8225.00	8225.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	8225.00	8225.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-12000.00	-12000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	-259.67	-259.67
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	-259.67	-259.67
29. Other Disbursements .....	9319.70	9319.70
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5285.03	5285.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5285.03	5285.03

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	181277.22	181277.22
34. Total Contribution Refunds (from Line 28(d)) .....	-259.67	-259.67
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	181536.89	181536.89
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	8225.00	8225.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	8225.00	8225.00

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

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

FOR LINE NUMBER: PAGE 6 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Richard JR 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 Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828675

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

**B. Richard JR 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 Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828676

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

**C. Richard JR 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 Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828677

Amount of Each Receipt this Period

416.00

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

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

1248.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. RICHARD JR ALTIG**

Mailing Address 15440 BEL-RED RD

City	State	Zip Code
REDMOND	WA	98052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6764007

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

**B. RICHARD JR ALTIG**

Mailing Address 15440 BEL-RED RD

City	State	Zip Code
REDMOND	WA	98052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6764008

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

**C. RICHARD JR ALTIG**

Mailing Address 15440 BEL-RED RD

City	State	Zip Code
REDMOND	WA	98052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6764009

Amount of Each Receipt this Period

416.00

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

1248.00

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

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

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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. SIMON A ARIAS**

Mailing Address 103 INDIAN MEADOW DR

City	State	Zip Code
MARS	PA	16046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	21	/	2015

Transaction ID : C6759756

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. SIMON A ARIAS**

Mailing Address 103 INDIAN MEADOW DR

City	State	Zip Code
MARS	PA	16046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	21	/	2015

Transaction ID : C6759760

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. SIMON A ARIAS**

Mailing Address 103 INDIAN MEADOW DR

City	State	Zip Code
MARS	PA	16046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	21	/	2015

Transaction ID : C6759761

Amount of Each Receipt this Period

100.00

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

300.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 196

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. SIMON A ARIAS**

Mailing Address 103 INDIAN MEADOW DR

City State Zip Code  
MARS PA 16046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6829201

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. SIMON A ARIAS**

Mailing Address 103 INDIAN MEADOW DR

City State Zip Code  
MARS PA 16046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6829202

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. SIMON A ARIAS**

Mailing Address 103 INDIAN MEADOW DR

City State Zip Code  
MARS PA 16046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6829203

Amount of Each Receipt this Period

100.00

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

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

300.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. Malka Arony**

Mailing Address 3217 E Tonto Ln

City State Zip Code  
Phoenix AZ 85050

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6758306

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **B. Malka Arony**

Mailing Address 3217 E Tonto Ln

City State Zip Code  
Phoenix AZ 85050

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6827875

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **C. Dennis R Arrington**

Mailing Address 2222 Bull St

City State Zip Code  
Savannah GA 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Local 4873

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 09 / 2015

Transaction ID : C6756515

Amount of Each Receipt this Period

100.00

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

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

400.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 196

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Dennis R Arrington**

Mailing Address 2222 Bull St

City

Savannah

State

GA

Zip Code

31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Local 4873

Occupation

Vice President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

02 / 05 / 2015

Transaction ID : C6794698

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Dennis R Arrington**

Mailing Address 2222 Bull St

City

Savannah

State

GA

Zip Code

31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Local 4873

Occupation

Vice President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 05 / 2015

Transaction ID : C6810300

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Dennis R Arrington**

Mailing Address 2222 Bull St

City

Savannah

State

GA

Zip Code

31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Local 4873

Occupation

Vice President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 31 / 2015

Transaction ID : C6813213

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Dennis R Arrington**

Mailing Address 2222 Bull St

City

Savannah

State

GA

Zip Code

31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Local 4873

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		04		2015

Transaction ID : C6849736

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Dennis R Arrington**

Mailing Address 2222 Bull St

City

Savannah

State

GA

Zip Code

31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Local 4873

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		02		2015

Transaction ID : C6854146

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JAMES BAILEY**

Mailing Address 121 FARRINGTON DR #E

City

RALEIGH

State

NC

Zip Code

27615

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 ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01		21		2015

Transaction ID : C6763146

Amount of Each Receipt this Period

100.00

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

300.00

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

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

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JAMES BAILEY**

Mailing Address 121 FARRINGTON DR #E

City State Zip Code  
 RALEIGH NC 27615

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 ▼

500.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6763147

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JAMES BAILEY**

Mailing Address 121 FARRINGTON DR #E

City State Zip Code  
 RALEIGH NC 27615

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 ▼

500.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6763148

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JAMES BAILEY**

Mailing Address 121 FARRINGTON DR #E

City State Zip Code  
 RALEIGH NC 27615

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 ▼

500.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6831335

Amount of Each Receipt this Period

100.00

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

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

300.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JAMES BAILEY**

Mailing Address 121 FARRINGTON DR #E

City State Zip Code  
 RALEIGH NC 27615

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 ▼

500.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6831336

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Lena Bailey**

Mailing Address 3201 Cherry Ridge St.,Ste.A109

City State Zip Code  
 San Antonio TX 78245

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local 4873

Occupation

Bus. Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

01 / 09 / 2015

Transaction ID : C6756524

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Lena Bailey**

Mailing Address 3201 Cherry Ridge St.,Ste.A109

City State Zip Code  
 San Antonio TX 78245

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local 4873

Occupation

Bus. Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

02 / 05 / 2015

Transaction ID : C6794699

Amount of Each Receipt this Period

50.00

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

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

200.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Lena Bailey**

Mailing Address 3201 Cherry Ridge St.,Ste.A109

City State Zip Code  
 San Antonio TX 78245

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local 4873

Occupation

Bus. Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2015

Transaction ID : C6810301

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Lena Bailey**

Mailing Address 3201 Cherry Ridge St.,Ste.A109

City State Zip Code  
 San Antonio TX 78245

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local 4873

Occupation

Bus. Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

Transaction ID : C6813214

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Lena Bailey**

Mailing Address 3201 Cherry Ridge St.,Ste.A109

City State Zip Code  
 San Antonio TX 78245

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local 4873

Occupation

Bus. Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2015

Transaction ID : C6849737

Amount of Each Receipt this Period

50.00

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

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

150.00

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

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

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(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Lena Bailey**

Mailing Address 3201 Cherry Ridge St.,Ste.A109

City State Zip Code  
San Antonio TX 78245

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local 4873

Occupation

Bus. Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 02 / 2015

Transaction ID : C6854147

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Michelle M Baxter**

Mailing Address PO Box 208

City State Zip Code  
Waco TX 76703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6759777

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. Michelle M Baxter**

Mailing Address PO Box 208

City State Zip Code  
Waco TX 76703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6829210

Amount of Each Receipt this Period

150.00

**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  
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(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. Yaroslav Bitman**

Mailing Address 4704 Saratoga Falls Ln

City State Zip Code  
 Raleigh NC 27614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6758389

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. Yaroslav Bitman**

Mailing Address 4704 Saratoga Falls Ln

City State Zip Code  
 Raleigh NC 27614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6758390

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. Yaroslav Bitman**

Mailing Address 4704 Saratoga Falls Ln

City State Zip Code  
 Raleigh NC 27614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6758391

Amount of Each Receipt this Period

100.00

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

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

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Yaroslav Bitman**

Mailing Address 4704 Saratoga Falls Ln

City	State	Zip Code
Raleigh	NC	27614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2015

Transaction ID : C6827961

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Yaroslav Bitman**

Mailing Address 4704 Saratoga Falls Ln

City	State	Zip Code
Raleigh	NC	27614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2015

Transaction ID : C6827962

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Yaroslav Bitman**

Mailing Address 4704 Saratoga Falls Ln

City	State	Zip Code
Raleigh	NC	27614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2015

Transaction ID : C6827963

Amount of Each Receipt this Period

100.00

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

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

300.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JASON BRATIN**

Mailing Address 1199 AMBER LN

City State Zip Code  
HARRISBURG PA 17111

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6763190

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JASON BRATIN**

Mailing Address 1199 AMBER LN

City State Zip Code  
HARRISBURG PA 17111

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6763191

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JASON BRATIN**

Mailing Address 1199 AMBER LN

City State Zip Code  
HARRISBURG PA 17111

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6763195

Amount of Each Receipt this Period

100.00

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

300.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JASON BRATIN**

Mailing Address 1199 AMBER LN

City

HARRISBURG

State

PA

Zip Code

17111

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6831361

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JASON BRATIN**

Mailing Address 1199 AMBER LN

City

HARRISBURG

State

PA

Zip Code

17111

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6831362

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JASON BRATIN**

Mailing Address 1199 AMBER LN

City

HARRISBURG

State

PA

Zip Code

17111

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6831363

Amount of Each Receipt this Period

200.00

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

400.00

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)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. DORIAN P BROWN**

Mailing Address 1706 15TH ST NW

City

WINTER HAVEN

State

FL

Zip Code

33881

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6760309

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. DORIAN P BROWN**

Mailing Address 1706 15TH ST NW

City

WINTER HAVEN

State

FL

Zip Code

33881

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6760313

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. DORIAN P BROWN**

Mailing Address 1706 15TH ST NW

City

WINTER HAVEN

State

FL

Zip Code

33881

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6760314

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. DORIAN P BROWN**

Mailing Address 1706 15TH ST NW

City

WINTER HAVEN

State

FL

Zip Code

33881

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

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 Y Y  
04 / 15 / 2015

Transaction ID : C6829638

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. DORIAN P BROWN**

Mailing Address 1706 15TH ST NW

City

WINTER HAVEN

State

FL

Zip Code

33881

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

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 Y Y  
04 / 15 / 2015

Transaction ID : C6829639

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. DORIAN P BROWN**

Mailing Address 1706 15TH ST NW

City

WINTER HAVEN

State

FL

Zip Code

33881

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

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 Y Y  
04 / 15 / 2015

Transaction ID : C6829640

Amount of Each Receipt this Period

200.00

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

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

400.00

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

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

FOR LINE NUMBER: PAGE 23 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JOSE A CARVAJAL**

Mailing Address 1818 ROGERS RD #1238

City State Zip Code  
 SAN ANTONIO TX 78251

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

01 / 21 / 2015

Transaction ID : C6763379

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JOSE A CARVAJAL**

Mailing Address 1818 ROGERS RD #1238

City State Zip Code  
 SAN ANTONIO TX 78251

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

01 / 21 / 2015

Transaction ID : C6763380

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JOSE A CARVAJAL**

Mailing Address 1818 ROGERS RD #1238

City State Zip Code  
 SAN ANTONIO TX 78251

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

01 / 21 / 2015

Transaction ID : C6763381

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 24 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JOSE A CARVAJAL**

Mailing Address 1818 ROGERS RD #1238

City

SAN ANTONIO

State

TX

Zip Code

78251

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 Y Y  
04 / 15 / 2015

Transaction ID : C6831443

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JOSE A CARVAJAL**

Mailing Address 1818 ROGERS RD #1238

City

SAN ANTONIO

State

TX

Zip Code

78251

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 Y Y  
04 / 15 / 2015

Transaction ID : C6831444

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JOSE A CARVAJAL**

Mailing Address 1818 ROGERS RD #1238

City

SAN ANTONIO

State

TX

Zip Code

78251

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 Y Y  
04 / 15 / 2015

Transaction ID : C6831445

Amount of Each Receipt this Period

100.00

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

300.00

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



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

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

FOR LINE NUMBER: PAGE 25 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. SAMANTHA X CHUI

Mailing Address 2327 TALLAPOOSA DR

City State Zip Code  
DULUTH GA 30097

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

National Income Life Insurance

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6759304

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. SAMANTHA X CHUI

Mailing Address 2327 TALLAPOOSA DR

City State Zip Code  
DULUTH GA 30097

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

National Income Life Insurance

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6759305

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. SAMANTHA X CHUI

Mailing Address 2327 TALLAPOOSA DR

City State Zip Code  
DULUTH GA 30097

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

National Income Life Insurance

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6759306

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. SAMANTHA X CHUI**

Mailing Address 2327 TALLAPOOSA DR

City  
DULUTH

State Zip Code  
GA 30097

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

National Income Life Insurance

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828809

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. SAMANTHA X CHUI**

Mailing Address 2327 TALLAPOOSA DR

City  
DULUTH

State Zip Code  
GA 30097

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

National Income Life Insurance

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828810

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. SAMANTHA X CHUI**

Mailing Address 2327 TALLAPOOSA DR

City  
DULUTH

State Zip Code  
GA 30097

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

National Income Life Insurance

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828811

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. JARED CLECKNER**

Mailing Address 14220 W 123RD TER

City  
OLATHE

State Zip Code  
KS 66062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6760348

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. JARED CLECKNER**

Mailing Address 14220 W 123RD TER

City  
OLATHE

State Zip Code  
KS 66062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6760349

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. JARED CLECKNER**

Mailing Address 14220 W 123RD TER

City  
OLATHE

State Zip Code  
KS 66062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6760350

Amount of Each Receipt this Period

100.00

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

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

300.00

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

PAGE 28 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JARED CLECKNER**

Mailing Address 6501 E COMMERCE AVE #170

City  
KANSAS CITYState  
MO  
Zip Code  
64120FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2015

Transaction ID : C6836028

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JARED CLECKNER**

Mailing Address 6501 E COMMERCE AVE #170

City  
KANSAS CITYState  
MO  
Zip Code  
64120FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2015

Transaction ID : C6836029

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JARED CLECKNER**

Mailing Address 6501 E COMMERCE AVE #170

City  
KANSAS CITYState  
MO  
Zip Code  
64120FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2015

Transaction ID : C6836030

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 29 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Eric L Cochran**

Mailing Address 1301 Se Princeton Pl

City State Zip Code  
 Lees Summit MO 64081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
 01 / 21 / 2015

Transaction ID : C6759121

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Eric L Cochran**

Mailing Address 1301 Se Princeton Pl

City State Zip Code  
 Lees Summit MO 64081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
 01 / 21 / 2015

Transaction ID : C6759122

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Eric L Cochran**

Mailing Address 1301 Se Princeton Pl

City State Zip Code  
 Lees Summit MO 64081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
 01 / 21 / 2015

Transaction ID : C6759123

Amount of Each Receipt this Period

100.00

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

300.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 30 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Eric L Cochran**

Mailing Address 1301 Se Princeton PI

City	State	Zip Code
Lees Summit	MO	64081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life InsuranceOccupation  
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
04		15		2015

Transaction ID : C6828642

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Eric L Cochran**

Mailing Address 1301 Se Princeton PI

City	State	Zip Code
Lees Summit	MO	64081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life InsuranceOccupation  
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
04		15		2015

Transaction ID : C6828643

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Eric L Cochran**

Mailing Address 1301 Se Princeton PI

City	State	Zip Code
Lees Summit	MO	64081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life InsuranceOccupation  
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
04		15		2015

Transaction ID : C6828644

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. David Cohen**

Mailing Address 5700 Wilshire Blvd Ste 480

City

Los Angeles

State

CA

Zip Code

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 ▼

900.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6758635

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. David Cohen**

Mailing Address 5700 Wilshire Blvd Ste 480

City

Los Angeles

State

CA

Zip Code

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 ▼

900.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6758636

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. David Cohen**

Mailing Address 5700 Wilshire Blvd Ste 480

City

Los Angeles

State

CA

Zip Code

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 ▼

900.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6758637

Amount of Each Receipt this Period

150.00

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

450.00

**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 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. David Cohen**

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code  
 Los Angeles CA 90036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 American Income Life

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828193

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. David Cohen**

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code  
 Los Angeles CA 90036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 American Income Life

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828194

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. David Cohen**

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code  
 Los Angeles CA 90036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 American Income Life

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828195

Amount of Each Receipt this Period

150.00

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

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

450.00



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

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

FOR LINE NUMBER: PAGE 33 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Micah Cohen**

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code  
Los Angeles CA 90036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759142

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Micah Cohen**

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code  
Los Angeles CA 90036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759143

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. Micah Cohen**

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code  
Los Angeles CA 90036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759144

Amount of Each Receipt this Period

150.00

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

450.00

**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 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Micah Cohen**

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code  
 Los Angeles CA 90036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828663

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Micah Cohen**

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code  
 Los Angeles CA 90036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828664

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. Micah Cohen**

Mailing Address 5700 Wilshire Blvd Ste 480

City State Zip Code  
 Los Angeles CA 90036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828665

Amount of Each Receipt this Period

150.00

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

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

450.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 35 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. RANDALL D COOK**

Mailing Address 6138 ANDREW THOMAS #131

City	State	Zip Code
CHARLOTTE	NC	28269

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 M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6763954

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. RANDALL D COOK**

Mailing Address 6138 ANDREW THOMAS #131

City	State	Zip Code
CHARLOTTE	NC	28269

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 M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6763955

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. RANDALL D COOK**

Mailing Address 6138 ANDREW THOMAS #131

City	State	Zip Code
CHARLOTTE	NC	28269

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 M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6763956

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 36 OF 196  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. RANDALL D COOK**

Mailing Address 6138 ANDREW THOMAS #131

City State Zip Code  
 CHARLOTTE NC 28269

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 Y Y  
 04 15 2015

Transaction ID : C6831699

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. RANDALL D COOK**

Mailing Address 6138 ANDREW THOMAS #131

City State Zip Code  
 CHARLOTTE NC 28269

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 Y Y  
 04 15 2015

Transaction ID : C6831700

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. RANDALL D COOK**

Mailing Address 6138 ANDREW THOMAS #131

City State Zip Code  
 CHARLOTTE NC 28269

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 Y Y  
 04 15 2015

Transaction ID : C6831701

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 37 OF 196  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. BRANDON C COOLEY**

Mailing Address 1320 N CONCORD AVE

City State Zip Code  
CHANDLER AZ 85225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759836

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. BRANDON C COOLEY**

Mailing Address 1320 N CONCORD AVE

City State Zip Code  
CHANDLER AZ 85225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759837

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. BRANDON C COOLEY**

Mailing Address 1320 N CONCORD AVE

City State Zip Code  
CHANDLER AZ 85225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759838

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 38 OF 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. BRANDON C COOLEY**

Mailing Address 1320 N CONCORD AVE

City State Zip Code  
 CHANDLER AZ 85225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6829245

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. BRANDON C COOLEY**

Mailing Address 1320 N CONCORD AVE

City State Zip Code  
 CHANDLER AZ 85225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6829246

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. BRANDON C COOLEY**

Mailing Address 1320 N CONCORD AVE

City State Zip Code  
 CHANDLER AZ 85225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6829247

Amount of Each Receipt this Period

100.00

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

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

300.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. NIGEL A CROWE**

Mailing Address 16611 HIGHLAND SUMMIT DR

City State Zip Code  
WILDWOOD MO 63011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759742

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. NIGEL A CROWE**

Mailing Address 16611 HIGHLAND SUMMIT DR

City State Zip Code  
WILDWOOD MO 63011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759743

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. NIGEL A CROWE**

Mailing Address 16611 HIGHLAND SUMMIT DR

City State Zip Code  
WILDWOOD MO 63011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759744

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 40 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. NIGEL A CROWE**

Mailing Address 16611 HIGHLAND SUMMIT DR

City State Zip Code  
WILDWOOD MO 63011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6829189

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. NIGEL A CROWE**

Mailing Address 16611 HIGHLAND SUMMIT DR

City State Zip Code  
WILDWOOD MO 63011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6829190

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. NIGEL A CROWE**

Mailing Address 16611 HIGHLAND SUMMIT DR

City State Zip Code  
WILDWOOD MO 63011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6829191

Amount of Each Receipt this Period

100.00

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

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

300.00



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

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

FOR LINE NUMBER: PAGE 41 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Kevin Davis**

Mailing Address 15 Morning Breeze Ct

City State Zip Code  
 Silver Springs MD 20904

FEC ID number of contributing federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6759173

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Kevin Davis**

Mailing Address 15 Morning Breeze Ct

City State Zip Code  
 Silver Springs MD 20904

FEC ID number of contributing federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6759174

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Kevin Davis**

Mailing Address 15 Morning Breeze Ct

City State Zip Code  
 Silver Springs MD 20904

FEC ID number of contributing federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6759175

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

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(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Kevin Davis**

Mailing Address 15 Morning Breeze Ct

City State Zip Code  
 Silver Springs MD 20904

FEC ID number of contributing federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828696

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Kevin Davis**

Mailing Address 15 Morning Breeze Ct

City State Zip Code  
 Silver Springs MD 20904

FEC ID number of contributing federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828697

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Kevin Davis**

Mailing Address 15 Morning Breeze Ct

City State Zip Code  
 Silver Springs MD 20904

FEC ID number of contributing federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828698

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 43 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. 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

AMERICAN INCOME LIFE INSURANCE

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6758586

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. 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

AMERICAN INCOME LIFE INSURANCE

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6758587

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. 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

AMERICAN INCOME LIFE INSURANCE

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6758588

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 44 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. 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

AMERICAN INCOME LIFE INSURANCE

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828151

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **B. 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

AMERICAN INCOME LIFE INSURANCE

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828152

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **C. 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

AMERICAN INCOME LIFE INSURANCE

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828153

Amount of Each Receipt this Period

40.00

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

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

120.00

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

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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JOSEPH DIECEDUE**

Mailing Address 5757 CORPORATE BLVD STE 104

City	State	Zip Code
BATON ROUGE	LA	70808

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 ▼

700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	21	/	2015

Transaction ID : C6760224

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JOSEPH DIECEDUE**

Mailing Address 5757 CORPORATE BLVD STE 104

City	State	Zip Code
BATON ROUGE	LA	70808

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 ▼

700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	21	/	2015

Transaction ID : C6760225

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JOSEPH DIECEDUE**

Mailing Address 5757 CORPORATE BLVD STE 104

City	State	Zip Code
BATON ROUGE	LA	70808

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 ▼

700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	21	/	2015

Transaction ID : C6760226

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 46 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JOSEPH DIECEDUE**

Mailing Address 5757 CORPORATE BLVD STE 104

City State Zip Code  
 BATON ROUGE LA 70808

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 15 2015

Transaction ID : C6829580

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JOSEPH DIECEDUE**

Mailing Address 5757 CORPORATE BLVD STE 104

City State Zip Code  
 BATON ROUGE LA 70808

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 15 2015

Transaction ID : C6829581

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. JOSEPH DIECEDUE**

Mailing Address 5757 CORPORATE BLVD STE 104

City State Zip Code  
 BATON ROUGE LA 70808

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 15 2015

Transaction ID : C6829582

Amount of Each Receipt this Period

100.00

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

400.00

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 47 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Cindy Diehm**

Mailing Address 2222 Bull Street  
Suite 200

City State Zip Code  
Savannah GA 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Local 4873

Occupation

Exec. Board

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 09 / 2015

Transaction ID : C6756518

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Cindy Diehm**

Mailing Address 2222 Bull Street  
Suite 200

City State Zip Code  
Savannah GA 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Local 4873

Occupation

Exec. Board

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2015

Transaction ID : C6794703

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Cindy Diehm**

Mailing Address 2222 Bull Street  
Suite 200

City State Zip Code  
Savannah GA 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Local 4873

Occupation

Exec. Board

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2015

Transaction ID : C6810305

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 48 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Cindy Diehm**

Mailing Address 2222 Bull Street  
Suite 200

City State Zip Code  
Savannah GA 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Local 4873

Occupation

Exec. Board

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

Transaction ID : C6813218

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Cindy Diehm**

Mailing Address 2222 Bull Street  
Suite 200

City State Zip Code  
Savannah GA 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Local 4873

Occupation

Exec. Board

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 04 / 2015

Transaction ID : C6849739

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Cindy Diehm**

Mailing Address 2222 Bull Street  
Suite 200

City State Zip Code  
Savannah GA 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Local 4873

Occupation

Exec. Board

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 02 / 2015

Transaction ID : C6854151

Amount of Each Receipt this Period

100.00

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

300.00

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



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

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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. DESI DIMITROVA**

Mailing Address 2286 SLOAN DR

City

LA VERNE

State

CA

Zip Code

91750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : C6759689

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. DESI DIMITROVA**

Mailing Address 2286 SLOAN DR

City

LA VERNE

State

CA

Zip Code

91750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : C6759690

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. DESI DIMITROVA**

Mailing Address 2286 SLOAN DR

City

LA VERNE

State

CA

Zip Code

91750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : C6759691

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 50 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. DESI DIMITROVA**

Mailing Address 2286 SLOAN DR

City State Zip Code  
LA VERNE CA 91750

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6829139

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. DESI DIMITROVA**

Mailing Address 2286 SLOAN DR

City State Zip Code  
LA VERNE CA 91750

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6829143

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. DESI DIMITROVA**

Mailing Address 2286 SLOAN DR

City State Zip Code  
LA VERNE CA 91750

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6829144

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 51 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. MITCHELL L DUPLANTIS**

Mailing Address 8 COACHMAN COURT

City State Zip Code  
 WILMINGTON DE 19803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6765445

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MITCHELL L DUPLANTIS**

Mailing Address 8 COACHMAN COURT

City State Zip Code  
 WILMINGTON DE 19803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6765446

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MITCHELL L DUPLANTIS**

Mailing Address 8 COACHMAN COURT

City State Zip Code  
 WILMINGTON DE 19803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6832595

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. MITCHELL L DUPLANTIS**

Mailing Address 8 COACHMAN COURT

City State Zip Code  
WILMINGTON DE 19803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6832596

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MITCHELL L DUPLANTIS**

Mailing Address 8 COACHMAN COURT

City State Zip Code  
WILMINGTON DE 19803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6832597

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. RICHARD J DYER**

Mailing Address 1309 N MERIDIAN AVE #112

City State Zip Code  
OKLAHOMA CITY OK 73107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6761080

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 53 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. RICHARD J DYER**

Mailing Address 1309 N MERIDIAN AVE #112

City State Zip Code  
 OKLAHOMA CITY OK 73107

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6761081

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. RICHARD J DYER**

Mailing Address 1309 N MERIDIAN AVE #112

City State Zip Code  
 OKLAHOMA CITY OK 73107

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6761082

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. RICHARD J DYER**

Mailing Address 1309 N MERIDIAN AVE #112

City State Zip Code  
 OKLAHOMA CITY OK 73107

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6830220

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 54 OF 196

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. RICHARD J DYER**

Mailing Address 1309 N MERIDIAN AVE #112

City State Zip Code  
 OKLAHOMA CITY OK 73107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6830221

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. RICHARD J DYER**

Mailing Address 1309 N MERIDIAN AVE #112

City State Zip Code  
 OKLAHOMA CITY OK 73107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6830222

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. DEBBIE J EZERNACK**

Mailing Address 1302 TREE CROSSINGS PKY

City State Zip Code  
 HOOVER AL 32544

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

01 / 21 / 2015

Transaction ID : C6762837

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 55 OF 196

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. DEBBIE J EZERNACK**

Mailing Address 1302 TREE CROSSINGS PKY

City State Zip Code  
HOOVER AL 32544

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 Y Y  
01 / 21 / 2015

Transaction ID : C6762838

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. DEBBIE J EZERNACK**

Mailing Address 1302 TREE CROSSINGS PKY

City State Zip Code  
HOOVER AL 32544

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 Y Y  
01 / 21 / 2015

Transaction ID : C6762839

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. DEBBIE J EZERNACK**

Mailing Address 1302 TREE CROSSINGS PKY

City State Zip Code  
HOOVER AL 32544

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 Y Y  
04 / 15 / 2015

Transaction ID : C6831202

Amount of Each Receipt this Period

100.00

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

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

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 56 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. DEBBIE J EZERNACK**

Mailing Address 1302 TREE CROSSINGS PKY

City	State	Zip Code
HOOVER	AL	32544

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 M	/	D D D	/	Y Y Y Y Y Y
04		15		2015

Transaction ID : C6831203

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. DEBBIE J EZERNACK**

Mailing Address 1302 TREE CROSSINGS PKY

City	State	Zip Code
HOOVER	AL	32544

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 M	/	D D D	/	Y Y Y Y Y Y
04		15		2015

Transaction ID : C6831204

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. LAURA FISHER**

Mailing Address 44 BLACK BEAR DR #1228

City	State	Zip Code
WALTHAM	MA	02451

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2015

Transaction ID : C6763540

Amount of Each Receipt this Period

41.67

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

241.67

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



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 57 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. LAURA FISHER**

Mailing Address 44 BLACK BEAR DR #1228

City	State	Zip Code
WALTHAM	MA	02451

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 ▼

250.02

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6763541

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

**B. LAURA FISHER**

Mailing Address 44 BLACK BEAR DR #1228

City	State	Zip Code
WALTHAM	MA	02451

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6763542

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

**C. LAURA FISHER**

Mailing Address 44 BLACK BEAR DR #1228

City	State	Zip Code
WALTHAM	MA	02451

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6831519

Amount of Each Receipt this Period

41.67

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

125.01

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 58 OF 196

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. LAURA FISHER**

Mailing Address 44 BLACK BEAR DR #1228

City State Zip Code  
WALTHAM MA 02451

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 ▼

250.02

Date of Receipt

04 / 15 / 2015

Transaction ID : C6831520

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

## **B. LAURA FISHER**

Mailing Address 44 BLACK BEAR DR #1228

City State Zip Code  
WALTHAM MA 02451

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

04 / 15 / 2015

Transaction ID : C6831521

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

## **C. Donald Foti**

Mailing Address 4071 Port Chicago Hwy St 200

City State Zip Code  
Concord CA 94520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6758653

Amount of Each Receipt this Period

200.00

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

283.34

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 59 OF 196

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Donald Foti**

Mailing Address 4071 Port Chicago Hwy St 200

City State Zip Code  
 Concord CA 94520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6758654

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. Donald Foti**

Mailing Address 4071 Port Chicago Hwy St 200

City State Zip Code  
 Concord CA 94520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6758655

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. Donald Foti**

Mailing Address 4071 Port Chicago Hwy St 200

City State Zip Code  
 Concord CA 94520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6828212

Amount of Each Receipt this Period

200.00

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

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

600.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 60 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. DONALD FOTI**

Mailing Address PO BOX 2500

City	State	Zip Code
NAPA	CA	94558

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2015

Transaction ID : C6834562

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. DONALD FOTI**

Mailing Address PO BOX 2500

City	State	Zip Code
NAPA	CA	94558

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2015

Transaction ID : C6834563

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. Susan Fuldauer**

Mailing Address 7229 Kingman Cir

City	State	Zip Code
Indianapolis	IN	46256

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		21		2015

Transaction ID : C6758373

Amount of Each Receipt this Period

300.00

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

700.00

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

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

PAGE 61 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Susan Fuldauer**

Mailing Address 7229 Kingman Cir

City	State	Zip Code
Indianapolis	IN	46256

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	15	/	2015

Transaction ID : C6827944

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. ROGER X FUNG**

Mailing Address 12845 NW FOREST SPRING LN

City	State	Zip Code
PORTLAND	OR	97229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

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
01	/	21	/	2015

Transaction ID : C6760396

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. ROGER X FUNG**

Mailing Address 12845 NW FOREST SPRING LN

City	State	Zip Code
PORTLAND	OR	97229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

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
01	/	21	/	2015

Transaction ID : C6760397

Amount of Each Receipt this Period

100.00

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

500.00

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 OF 196

☒ 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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. ROGER X FUNG**

Mailing Address 12845 NW FOREST SPRING LN

City State Zip Code  
 PORTLAND OR 97229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

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 Y  
 01 / 21 / 2015

Transaction ID : C6760398

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. ROGER X FUNG**

Mailing Address 12845 NW FOREST SPRING LN

City State Zip Code  
 PORTLAND OR 97229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

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 Y  
 04 / 15 / 2015

Transaction ID : C6829708

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. ROGER X FUNG**

Mailing Address 12845 NW FOREST SPRING LN

City State Zip Code  
 PORTLAND OR 97229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

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 Y  
 04 / 15 / 2015

Transaction ID : C6829709

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 63 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. ROGER X FUNG**

Mailing Address 12845 NW FOREST SPRING LN

City State Zip Code  
 PORTLAND OR 97229

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

American Income

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 Y  
 04 / 15 / 2015

Transaction ID : C6829710

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. CINDY FURER**

Mailing Address 15835 WINDROSE CT

City State Zip Code  
 SAN DIEGO CA 92127

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

American Income Life Ins.

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6759893

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. CINDY FURER**

Mailing Address 15835 WINDROSE CT

City State Zip Code  
 SAN DIEGO CA 92127

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

American Income Life Ins.

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6759894

Amount of Each Receipt this Period

150.00

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

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

500.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 64 OF 196

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. CINDY FURER**

Mailing Address 15835 WINDROSE CT

City

SAN DIEGO

State

CA

Zip Code

92127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759898

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **B. CINDY FURER**

Mailing Address 15835 WINDROSE CT

City

SAN DIEGO

State

CA

Zip Code

92127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6829297

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **C. CINDY FURER**

Mailing Address 15835 WINDROSE CT

City

SAN DIEGO

State

CA

Zip Code

92127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6829298

Amount of Each Receipt this Period

150.00

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

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

450.00



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

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

 FOR LINE NUMBER: PAGE 65 OF 196  
 (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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. CINDY FURER**

Mailing Address 15835 WINDROSE CT

City	State	Zip Code
SAN DIEGO	CA	92127

FEC ID number of contributing federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6829299

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. ERIC GIGLIONE**

Mailing Address 151 INDUSTRIAL WAY EAST BLDG C

City	State	Zip Code
EATONTOWN	NJ	07724

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 ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6766514

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**C. ERIC GIGLIONE**

Mailing Address 151 INDUSTRIAL WAY EAST BLDG C

City	State	Zip Code
EATONTOWN	NJ	07724

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 ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6766515

Amount of Each Receipt this Period

400.00

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

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

950.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 66 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. ERIC GIGLIONE**

Mailing Address 151 INDUSTRIAL WAY EAST BLDG C

City	State	Zip Code
EATONTOWN	NJ	07724

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 ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6766516

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**B. ERIC GIGLIONE**

Mailing Address 151 INDUSTRIAL WAY EAST BLDG C

City	State	Zip Code
EATONTOWN	NJ	07724

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 ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6836119

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**C. ERIC GIGLIONE**

Mailing Address 151 INDUSTRIAL WAY EAST BLDG C

City	State	Zip Code
EATONTOWN	NJ	07724

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 ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6836120

Amount of Each Receipt this Period

400.00

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

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

1200.00

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

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

FOR LINE NUMBER: PAGE 67 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. ERIC GIGLIONE**

Mailing Address 151 INDUSTRIAL WAY EAST BLDG C

City State Zip Code  
 EATONTOWN NJ 07724

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 ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6836121

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

## **B. DENISE E GILBERT**

Mailing Address PO Box 208

City State Zip Code  
 Waco TX 76703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6759434

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **C. DENISE E GILBERT**

Mailing Address PO Box 208

City State Zip Code  
 Waco TX 76703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828915

Amount of Each Receipt this Period

150.00

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

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

700.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Carl Michael Goodwin**

Mailing Address 54 E Pierrepont Ave

City

Rutherford

State

NJ

Zip Code

07070-2331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

01 / 30 / 2015

Transaction ID : C6793962

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Carl Michael Goodwin**

Mailing Address 54 E Pierrepont Ave

City

Rutherford

State

NJ

Zip Code

07070-2331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

02 / 25 / 2015

Transaction ID : C6801210

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Carl Michael Goodwin**

Mailing Address 54 E Pierrepont Ave

City

Rutherford

State

NJ

Zip Code

07070-2331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

03 / 19 / 2015

Transaction ID : C6810240

Amount of Each Receipt this Period

40.00

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

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

120.00

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 69 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Carl Michael Goodwin**

Mailing Address 54 E Pierrepont Ave

City

Rutherford

State

NJ

Zip Code

07070-2331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

PRESIDENT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

04 / 23 / 2015

Transaction ID : C6841602

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. Carl Michael Goodwin**

Mailing Address 54 E Pierrepont Ave

City

Rutherford

State

NJ

Zip Code

07070-2331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

PRESIDENT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

05 / 27 / 2015

Transaction ID : C6851282

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Carl Michael Goodwin**

Mailing Address 54 E Pierrepont Ave

City

Rutherford

State

NJ

Zip Code

07070-2331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

PRESIDENT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 29 / 2015

Transaction ID : C6862823

Amount of Each Receipt this Period

40.00

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

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

140.00

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

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

FOR LINE NUMBER: PAGE 70 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Steven K Greer**

Mailing Address 43 Nocturne Woods Pl

City State Zip Code  
The Woodlands TX 77382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN INCOME LIFE INSURANCE

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6758583

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Steven K Greer**

Mailing Address 43 Nocturne Woods Pl

City State Zip Code  
The Woodlands TX 77382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN INCOME LIFE INSURANCE

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6758584

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Steven K Greer**

Mailing Address 43 Nocturne Woods Pl

City State Zip Code  
The Woodlands TX 77382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN INCOME LIFE INSURANCE

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6758585

Amount of Each Receipt this Period

300.00

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 71 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Steven K Greer**

Mailing Address 43 Nocturne Woods Pl

City State Zip Code  
 The Woodlands TX 77382

FEC ID number of contributing federal political committee.

C

Name of Employer

AMERICAN INCOME LIFE INSURANCE

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 15 2015

Transaction ID : C6828148

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Steven K Greer**

Mailing Address 43 Nocturne Woods Pl

City State Zip Code  
 The Woodlands TX 77382

FEC ID number of contributing federal political committee.

C

Name of Employer

AMERICAN INCOME LIFE INSURANCE

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 15 2015

Transaction ID : C6828149

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Steven K Greer**

Mailing Address 43 Nocturne Woods Pl

City State Zip Code  
 The Woodlands TX 77382

FEC ID number of contributing federal political committee.

C

Name of Employer

AMERICAN INCOME LIFE INSURANCE

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 15 2015

Transaction ID : C6828150

Amount of Each Receipt this Period

300.00

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 72 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Kelly Gschwend**

Mailing Address 621 Sequoia St

City State Zip Code  
 Brentwood CA 94513

FEC ID number of contributing federal political committee.

C

Name of Employer

LOCAL 29

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 13 2015

Transaction ID : C6756820

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Kelly Gschwend**

Mailing Address 621 Sequoia St

City State Zip Code  
 Brentwood CA 94513

FEC ID number of contributing federal political committee.

C

Name of Employer

LOCAL 29

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 24 2015

Transaction ID : C6801263

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Kelly Gschwend**

Mailing Address 621 Sequoia St

City State Zip Code  
 Brentwood CA 94513

FEC ID number of contributing federal political committee.

C

Name of Employer

LOCAL 29

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 10 2015

Transaction ID : C6811345

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 73 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Kelly Gschwend**

Mailing Address 621 Sequoia St

City State Zip Code  
 Brentwood CA 94513

FEC ID number of contributing federal political committee.

C

Name of Employer

LOCAL 29

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2015

Transaction ID : C6840504

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Kelly Gschwend**

Mailing Address 621 Sequoia St

City State Zip Code  
 Brentwood CA 94513

FEC ID number of contributing federal political committee.

C

Name of Employer

LOCAL 29

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 20 / 2015

Transaction ID : C6849641

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Kelly Gschwend**

Mailing Address 621 Sequoia St

City State Zip Code  
 Brentwood CA 94513

FEC ID number of contributing federal political committee.

C

Name of Employer

LOCAL 29

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2015

Transaction ID : C6861758

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Mark Hancock**

Mailing Address 12546 Walnut Ridge Pl

City	State	Zip Code
Fishers	IN	46038

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN INCOME LIFE INS. CO.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6758334

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Mark Hancock**

Mailing Address 12546 Walnut Ridge Pl

City	State	Zip Code
Fishers	IN	46038

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN INCOME LIFE INS. CO.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6758335

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Mark Hancock**

Mailing Address 12546 Walnut Ridge Pl

City	State	Zip Code
Fishers	IN	46038

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN INCOME LIFE INS. CO.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6758336

Amount of Each Receipt this Period

100.00

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

300.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 75 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Mark Hancock**

Mailing Address 12546 Walnut Ridge Pl

City	State	Zip Code
Fishers	IN	46038

FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	15	/	2015

Transaction ID : C6827910

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Mark Hancock**

Mailing Address 12546 Walnut Ridge Pl

City	State	Zip Code
Fishers	IN	46038

FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	15	/	2015

Transaction ID : C6827911

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Mark Hancock**

Mailing Address 12546 Walnut Ridge Pl

City	State	Zip Code
Fishers	IN	46038

FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	15	/	2015

Transaction ID : C6827912

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. MATHEW R HART**

Mailing Address 8843 W RANCH RD

City  
TRACY

State Zip Code  
CA 95376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6761489

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MATHEW R HART**

Mailing Address 8843 W RANCH RD

City  
TRACY

State Zip Code  
CA 95376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6761490

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MATHEW R HART**

Mailing Address 8843 W RANCH RD

City  
TRACY

State Zip Code  
CA 95376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6761491

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 77 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. MATHEW R HART**

Mailing Address 8843 W RANCH RD

City State Zip Code  
 TRACY CA 95376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6830495

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MATHEW R HART**

Mailing Address 8843 W RANCH RD

City State Zip Code  
 TRACY CA 95376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6830496

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MATHEW R HART**

Mailing Address 8843 W RANCH RD

City State Zip Code  
 TRACY CA 95376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6830500

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. ZACHARY T HART**

Mailing Address 1901 WESTRIDGE DR

City	State	Zip Code
ROCHESTER HILLS	MI	48306

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
04	/	15	/	2015

Transaction ID : C6835775

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. ZACHARY T HART**

Mailing Address 1901 WESTRIDGE DR

City	State	Zip Code
ROCHESTER HILLS	MI	48306

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
04	/	15	/	2015

Transaction ID : C6835776

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. DAVID HAUSMAN**

Mailing Address 12 RIDGEVIEW CT

City	State	Zip Code
Ringoes	NJ	08551

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	21	/	2015

Transaction ID : C6766534

Amount of Each Receipt this Period

100.00

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

700.00

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)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. DAVID HAUSMAN**

Mailing Address 12 RIDGEVIEW CT

City

Ringoes

State

NJ

Zip Code

08551

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Information Requested

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6766535

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. DAVID HAUSMAN**

Mailing Address 12 RIDGEVIEW CT

City

Ringoes

State

NJ

Zip Code

08551

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Information Requested

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6766536

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. DAVID P HAUSMAN**

Mailing Address 12 RIDGEVIEW CT

City

RINGOES

State

NJ

Zip Code

08551

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6836146

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 80 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. DAVID P HAUSMAN**

Mailing Address 12 RIDGEVIEW CT

City State Zip Code  
 RINGOES NJ 08551

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6836147

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. DAVID P HAUSMAN**

Mailing Address 12 RIDGEVIEW CT

City State Zip Code  
 RINGOES NJ 08551

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6836148

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Rob Hay**

Mailing Address 5515 5540 Falmouth St

City State Zip Code  
 Richmond VA 23230

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6759199

Amount of Each Receipt this Period

250.00

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

550.00

**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 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Rob Hay**

Mailing Address 5515 5540 Falmouth St

City State Zip Code  
 Richmond VA 23230

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 ▼

1000.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759200

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Rob Hay**

Mailing Address 5515 5540 Falmouth St

City State Zip Code  
 Richmond VA 23230

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 ▼

1000.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759201

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Rob Hay**

Mailing Address 5515 5540 Falmouth St

City State Zip Code  
 Richmond VA 23230

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 ▼

1000.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6828721

Amount of Each Receipt this Period

250.00

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

750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. ROB HAY**

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 Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6836985

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. ROB HAY**

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 Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6836986

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Billie Faye Headrick**

Mailing Address 3935 Hamill Rd

City

Hixson

State

TN

Zip Code

37343-3516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

Representative

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

01 / 30 / 2015

Transaction ID : C6793977

Amount of Each Receipt this Period

40.00

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

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

540.00

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

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

FOR LINE NUMBER: PAGE 83 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Billie Faye Headrick**

Mailing Address 3935 Hamill Rd

City

Hixson

State

TN

Zip Code

37343-3516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2015

Transaction ID : C6801238

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Billie Faye Headrick**

Mailing Address 3935 Hamill Rd

City

Hixson

State

TN

Zip Code

37343-3516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2015

Transaction ID : C6810254

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Billie Faye Headrick**

Mailing Address 3935 Hamill Rd

City

Hixson

State

TN

Zip Code

37343-3516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2015

Transaction ID : C6841617

Amount of Each Receipt this Period

60.00

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

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

140.00

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 84 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Billie Faye Headrick**

Mailing Address 3935 Hamill Rd

City

Hixson

State

TN

Zip Code

37343-3516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

05 / 27 / 2015

Transaction ID : C6851296

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Billie Faye Headrick**

Mailing Address 3935 Hamill Rd

City

Hixson

State

TN

Zip Code

37343-3516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 29 / 2015

Transaction ID : C6862837

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Matt M Henderson**

Mailing Address 1235 Snug Harbor Dr

City

Casselberry

State

FL

Zip Code

32707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1460.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759148

Amount of Each Receipt this Period

250.00

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

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

330.00

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

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

FOR LINE NUMBER: PAGE 85 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Matt M Henderson**

Mailing Address 1235 Snug Harbor Dr

City State Zip Code  
 Casselberry FL 32707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1460.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759149

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Matt M Henderson**

Mailing Address 1235 Snug Harbor Dr

City State Zip Code  
 Casselberry FL 32707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1460.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759150

Amount of Each Receipt this Period

210.00

Full Name (Last, First, Middle Initial)

**C. 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 Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1460.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6828669

Amount of Each Receipt this Period

250.00

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

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

710.00

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

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

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(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Matt M Henderson**

Mailing Address 1235 Snug Harbor Dr

City State Zip Code  
 Casselberry FL 32707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828670

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Matt M Henderson**

Mailing Address 1235 Snug Harbor Dr

City State Zip Code  
 Casselberry FL 32707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828671

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. CHRISTOPHER HERNANDEZ**

Mailing Address 2840 N PROSPECT AVE

City State Zip Code  
 MILWAUKEE WI 53211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6762236

Amount of Each Receipt this Period

100.00

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

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

600.00

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

Use separate schedule(s)  
for each category of the  
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PAGE 87 OF 196

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. CHRISTOPHER HERNANDEZ**

Mailing Address 2840 N PROSPECT AVE

City State Zip Code  
MILWAUKEE WI 53211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6762237

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER HERNANDEZ**

Mailing Address 2840 N PROSPECT AVE

City State Zip Code  
MILWAUKEE WI 53211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6762238

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. CHRISTOPHER HERNANDEZ**

Mailing Address 2840 N PROSPECT AVE

City State Zip Code  
MILWAUKEE WI 53211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6830980

Amount of Each Receipt this Period

100.00

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

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

300.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. CHRISTOPHER HERNANDEZ**

Mailing Address 2840 N PROSPECT AVE

City State Zip Code  
MILWAUKEE WI 53211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6830981

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER HERNANDEZ**

Mailing Address 2840 N PROSPECT AVE

City State Zip Code  
MILWAUKEE WI 53211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6830982

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Matthew P Hogan**

Mailing Address 1701B Ellington Rd

City State Zip Code  
Conyers GA 30013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income Life Ins.

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6759130

Amount of Each Receipt this Period

100.00

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

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

300.00



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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Matthew P Hogan**

Mailing Address 1701B Ellington Rd

City State Zip Code  
 Conyers GA 30013

FEC ID number of contributing federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6759131

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Matthew P Hogan**

Mailing Address 1701B Ellington Rd

City State Zip Code  
 Conyers GA 30013

FEC ID number of contributing federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6759132

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Matthew P Hogan**

Mailing Address 1701B Ellington Rd

City State Zip Code  
 Conyers GA 30013

FEC ID number of contributing federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828651

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Matthew P Hogan**

Mailing Address 1701B Ellington Rd

City State Zip Code  
Conyers GA 30013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828652

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Matthew P Hogan**

Mailing Address 1701B Ellington Rd

City State Zip Code  
Conyers GA 30013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828653

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MARKO JANKOVIC**

Mailing Address 5771 MISSION CENTER RD #208

City State Zip Code  
SAN DIEGO CA 92108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6761405

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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for each category of the  
Detailed Summary Page

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(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. MARKO JANKOVIC**

Mailing Address 5771 MISSION CENTER RD #208

City State Zip Code  
 SAN DIEGO CA 92108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6761406

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. MARKO JANKOVIC**

Mailing Address 5771 MISSION CENTER RD #208

City State Zip Code  
 SAN DIEGO CA 92108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6761407

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. MARKO JANKOVIC**

Mailing Address 5771 MISSION CENTER RD #208

City State Zip Code  
 SAN DIEGO CA 92108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6830441

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. MARKO JANKOVIC**

Mailing Address 5771 MISSION CENTER RD #208

City State Zip Code  
 SAN DIEGO CA 92108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6830442

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. MARKO JANKOVIC**

Mailing Address 5771 MISSION CENTER RD #208

City State Zip Code  
 SAN DIEGO CA 92108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6830443

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. John W Jatoft**

Mailing Address 4071 Port Chicago Hwy  
 Suite 200

City State Zip Code  
 Concord CA 94520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income Life

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6758351

Amount of Each Receipt this Period

200.00

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

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

400.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. John W Jatoft**

Mailing Address 4071 Port Chicago Hwy  
Suite 200

City State Zip Code  
Concord CA 94520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6758352

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. John W Jatoft**

Mailing Address 4071 Port Chicago Hwy  
Suite 200

City State Zip Code  
Concord CA 94520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6758353

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. John W Jatoft**

Mailing Address 4071 Port Chicago Hwy  
Suite 200

City State Zip Code  
Concord CA 94520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6827925

Amount of Each Receipt this Period

200.00

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

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

600.00

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

PAGE 94 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. John W Jatoft**Mailing Address 4071 Port Chicago Hwy  
Suite 200

City	State	Zip Code
Concord	CA	94520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	5

Transaction ID : C6827926

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. KYLE T JOHNSON**

Mailing Address 1175 PINE GROVE POINTE DR

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : C6761640

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. KYLE T JOHNSON**

Mailing Address 1175 PINE GROVE POINTE DR

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : C6761641

Amount of Each Receipt this Period

100.00

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

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

400.00

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

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

FOR LINE NUMBER: PAGE 95 OF 196  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. KYLE T JOHNSON**

Mailing Address 1175 PINE GROVE POINTE DR

City State Zip Code  
 ROSWELL GA 30075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6761642

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. KYLE T JOHNSON**

Mailing Address 1175 PINE GROVE POINTE DR

City State Zip Code  
 ROSWELL GA 30075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6830597

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. KYLE T JOHNSON**

Mailing Address 1175 PINE GROVE POINTE DR

City State Zip Code  
 ROSWELL GA 30075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6830598

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. KYLE T JOHNSON**

Mailing Address 1175 PINE GROVE POINTE DR

City State Zip Code  
 ROSWELL GA 30075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6830599

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Theatla Jones**

Mailing Address 2222 Bull St

City State Zip Code  
 Savannah GA 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

OPEIU, Local #4873

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 09 / 2015

Transaction ID : C6756528

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Theatla Jones**

Mailing Address 2222 Bull St

City State Zip Code  
 Savannah GA 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

OPEIU, Local #4873

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2015

Transaction ID : C6794705

Amount of Each Receipt this Period

100.00

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

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

300.00



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

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

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(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Theatla Jones**

Mailing Address 2222 Bull St

City State Zip Code  
 Savannah GA 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local #4873

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2015

Transaction ID : C6810307

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Theatla Jones**

Mailing Address 2222 Bull St

City State Zip Code  
 Savannah GA 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local #4873

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

Transaction ID : C6813220

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Theatla Jones**

Mailing Address 2222 Bull St

City State Zip Code  
 Savannah GA 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local #4873

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2015

Transaction ID : C6849748

Amount of Each Receipt this Period

100.00

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

300.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 98 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Theatla Jones**

Mailing Address 2222 Bull St

City State Zip Code  
Savannah GA 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local #4873

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 02 / 2015

Transaction ID : C6854153

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. STEPHEN J JUBREY**

Mailing Address 1440 CARROLLTON PRKWY #32207

City State Zip Code  
CARROLLTON TX 75010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6760477

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. STEPHEN J JUBREY**

Mailing Address 1440 CARROLLTON PRKWY #32207

City State Zip Code  
CARROLLTON TX 75010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6760478

Amount of Each Receipt this Period

100.00

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

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

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 99 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. STEPHEN J JUBREY**

Mailing Address 1440 CARROLLTON PRKWY #32207

City	State	Zip Code
CARROLLTON	TX	75010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6760479

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. STEPHEN J JUBREY**

Mailing Address 1440 CARROLLTON PRKWY #32207

City	State	Zip Code
CARROLLTON	TX	75010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6829773

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. STEPHEN J JUBREY**

Mailing Address 1440 CARROLLTON PRKWY #32207

City	State	Zip Code
CARROLLTON	TX	75010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6829774

Amount of Each Receipt this Period

100.00

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

300.00

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

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

PAGE 100 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. STEPHEN J JUBREY**

Mailing Address 1440 CARROLLTON PRKWY #32207

City	State	Zip Code
CARROLLTON	TX	75010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6829775

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Sidney Kalban**Mailing Address 2222 Bull St  
Suite 200

City	State	Zip Code
Savannah	GA	31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local #4873

Occupation

member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	09	/	2015

Transaction ID : C6756525

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Sidney Kalban**Mailing Address 2222 Bull St  
Suite 200

City	State	Zip Code
Savannah	GA	31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local #4873

Occupation

member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : C6794706

Amount of Each Receipt this Period

50.00

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

200.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

### A. Sidney Kalban

Mailing Address 2222 Bull St  
Suite 200

City Savannah State GA Zip Code 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local #4873

Occupation

member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2015

Transaction ID : C6810308

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

### B. Sidney Kalban

Mailing Address 2222 Bull St  
Suite 200

City Savannah State GA Zip Code 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local #4873

Occupation

member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

Transaction ID : C6813221

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

### C. Sidney Kalban

Mailing Address 2222 Bull St  
Suite 200

City Savannah State GA Zip Code 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local #4873

Occupation

member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 04 / 2015

Transaction ID : C6849745

Amount of Each Receipt this Period

50.00

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 102 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. Sidney Kalban**

Mailing Address 2222 Bull St  
Suite 200

City State Zip Code  
Savannah GA 31401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU, Local #4873

Occupation  
member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 02 / 2015

Transaction ID : C6854154

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Terry Keller**

Mailing Address 1137 Wlper St  
Apt 26

City State Zip Code  
Hayward CA 94541-6768

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation  
Business Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 13 / 2015

Transaction ID : C6756818

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. Terry Keller**

Mailing Address 1137 Wlper St  
Apt 26

City State Zip Code  
Hayward CA 94541-6768

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation  
Business Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2015

Transaction ID : C6801261

Amount of Each Receipt this Period

40.00

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

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

140.00

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

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

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(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. Terry Keller**

Mailing Address 1137 Wlper St  
Apt 26

City State Zip Code  
Hayward CA 94541-6768

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Business Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2015

Transaction ID : C6811343

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **B. Terry Keller**

Mailing Address 1137 Wlper St  
Apt 26

City State Zip Code  
Hayward CA 94541-6768

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Business Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2015

Transaction ID : C6840502

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **C. Terry Keller**

Mailing Address 1137 Wlper St  
Apt 26

City State Zip Code  
Hayward CA 94541-6768

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Business Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 20 / 2015

Transaction ID : C6849639

Amount of Each Receipt this Period

50.00

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

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

130.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Terry Keller**

Mailing Address 1137 Wlper St  
Apt 26

City State Zip Code  
Hayward CA 94541-6768

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Business Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 24 / 2015

Transaction ID : C6861757

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. CHRIS LAFOND**

Mailing Address 27 TYLER RD

City State Zip Code  
LEXINGTON MA 02420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6766028

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

**C. CHRIS LAFOND**

Mailing Address 27 TYLER RD

City State Zip Code  
LEXINGTON MA 02420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6766029

Amount of Each Receipt this Period

41.67

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

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

123.34



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

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

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 (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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. CHRIS LAFOND**

Mailing Address 27 TYLER RD

City  
LEXINGTONState Zip Code  
MA 02420FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

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

Transaction ID : C6766030

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

**B. CHRIS LAFOND**

Mailing Address 27 TYLER RD

City  
LEXINGTONState Zip Code  
MA 02420FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	5

Transaction ID : C6832988

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

**C. CHRIS LAFOND**

Mailing Address 27 TYLER RD

City  
LEXINGTONState Zip Code  
MA 02420FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	5

Transaction ID : C6832989

Amount of Each Receipt this Period

41.67

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

125.01

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. CHRIS LAFOND**

Mailing Address 27 TYLER RD

City  
LEXINGTON

State Zip Code  
MA 02420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6832990

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

## **B. SABRINA N LLOYD**

Mailing Address 9 LONGMEADOW DR

City  
BARRINGTON HILLS

State Zip Code  
IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6759712

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. SABRINA N LLOYD**

Mailing Address 9 LONGMEADOW DR

City  
BARRINGTON HILLS

State Zip Code  
IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6759713

Amount of Each Receipt this Period

100.00

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

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

241.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 107 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. SABRINA N LLOYD**

Mailing Address 9 LONGMEADOW DR

City	State	Zip Code
BARRINGTON HILLS	IL	60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6759714

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. SABRINA N LLOYD**

Mailing Address 9 LONGMEADOW DR

City	State	Zip Code
BARRINGTON HILLS	IL	60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6829161

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. SABRINA N LLOYD**

Mailing Address 9 LONGMEADOW DR

City	State	Zip Code
BARRINGTON HILLS	IL	60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6829162

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. SABRINA N LLOYD**

Mailing Address 9 LONGMEADOW DR

City State Zip Code  
 BARRINGTON HILLS IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6829163

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. CHRIS A LUSSIER**

Mailing Address 8728 CUMBERNAULD CIR N

City State Zip Code  
 GERMANTOWN TN 38139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6759989

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. CHRIS A LUSSIER**

Mailing Address 8728 CUMBERNAULD CIR N

City State Zip Code  
 GERMANTOWN TN 38139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6759990

Amount of Each Receipt this Period

100.00

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

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

300.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. CHRIS A LUSSIER**

Mailing Address 8728 CUMBERNAULD CIR N

City State Zip Code  
GERMANTOWN TN 38139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6759991

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. CHRIS A LUSSIER**

Mailing Address 8728 CUMBERNAULD CIR N

City State Zip Code  
GERMANTOWN TN 38139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6829376

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. CHRIS A LUSSIER**

Mailing Address 8728 CUMBERNAULD CIR N

City State Zip Code  
GERMANTOWN TN 38139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6829377

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. CHRIS A LUSSIER**

Mailing Address 8728 CUMBERNAULD CIR N

City State Zip Code  
 GERMANTOWN TN 38139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6829378

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Tim R McAdams**

Mailing Address 3645 Marketplace Blvd #130-298

City State Zip Code  
 East Point GA 30344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6758659

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Tim R McAdams**

Mailing Address 3645 Marketplace Blvd #130-298

City State Zip Code  
 East Point GA 30344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6758660

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Tim R McAdams**

Mailing Address 3645 Marketplace Blvd #130-298

City	State	Zip Code
East Point	GA	30344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6758661

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Tim R McAdams**

Mailing Address 3645 Marketplace Blvd #130-298

City	State	Zip Code
East Point	GA	30344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6828213

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Tim R McAdams**

Mailing Address 3645 Marketplace Blvd #130-298

City	State	Zip Code
East Point	GA	30344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6828214

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Tim R McAdams**

Mailing Address 3645 Marketplace Blvd #130-298

City State Zip Code  
 East Point GA 30344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828215

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. 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

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6758313

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**c. 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

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6758314

Amount of Each Receipt this Period

50.00

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

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

200.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. 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

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6758315

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. 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

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6827880

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. 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

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6827882

Amount of Each Receipt this Period

50.00

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

150.00

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

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

Use separate schedule(s)  
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(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6827883

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Suzanne Mode**

Mailing Address 6515 Francis Ave N

City

Seattle

State

WA

Zip Code

98103-5243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 8

Occupation

Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 09 / 2015

Transaction ID : C6756482

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Suzanne Mode**

Mailing Address 6515 Francis Ave N

City

Seattle

State

WA

Zip Code

98103-5243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 8

Occupation

Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2015

Transaction ID : C6794694

Amount of Each Receipt this Period

25.00

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

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

100.00

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

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

FOR LINE NUMBER: PAGE 115 OF 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. Suzanne Mode**

Mailing Address 6515 Francis Ave N

City State Zip Code  
 Seattle WA 98103-5243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 8

Occupation

Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

Transaction ID : C6797795

Amount of Each Receipt this Period

9.60

Full Name (Last, First, Middle Initial)

## **B. Suzanne Mode**

Mailing Address 6515 Francis Ave N

City State Zip Code  
 Seattle WA 98103-5243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 8

Occupation

Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2015

Transaction ID : C6801233

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Suzanne Mode**

Mailing Address 6515 Francis Ave N

City State Zip Code  
 Seattle WA 98103-5243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 8

Occupation

Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2015

Transaction ID : C6811322

Amount of Each Receipt this Period

20.00

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

279.60

**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  
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FOR LINE NUMBER: PAGE 116 OF 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. Suzanne Mode**

Mailing Address 6515 Francis Ave N

City State Zip Code  
 Seattle WA 98103-5243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 8

Occupation

Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 09 / 2015

Transaction ID : C6837615

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **B. Suzanne Mode**

Mailing Address 6515 Francis Ave N

City State Zip Code  
 Seattle WA 98103-5243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 8

Occupation

Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2015

Transaction ID : C6843864

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

## **C. Suzanne Mode**

Mailing Address 6515 Francis Ave N

City State Zip Code  
 Seattle WA 98103-5243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 8

Occupation

Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015

Transaction ID : C6854233

Amount of Each Receipt this Period

15.00

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

65.00

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

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

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

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(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. TRAVIS P MOODY**

Mailing Address 14417 SPRING DR

City State Zip Code  
 PROSPECT KY 40059

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6761726

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. TRAVIS P MOODY**

Mailing Address 14417 SPRING DR

City State Zip Code  
 PROSPECT KY 40059

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6761727

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. TRAVIS P MOODY**

Mailing Address 14417 SPRING DR

City State Zip Code  
 PROSPECT KY 40059

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6761728

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

<b>A. TRAVIS P MOODY</b> Full Name (Last, First, Middle Initial) Mailing Address 14417 SPRING DR City PROSPECT State KY Zip Code 40059 FEC ID number of contributing federal political committee. C Name of Employer American Income Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : C6830654</b> Amount of Each Receipt this Period 100.00
<b>B. TRAVIS P MOODY</b> Full Name (Last, First, Middle Initial) Mailing Address 14417 SPRING DR City PROSPECT State KY Zip Code 40059 FEC ID number of contributing federal political committee. C Name of Employer American Income Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : C6830655</b> Amount of Each Receipt this Period 100.00
<b>C. TRAVIS P MOODY</b> Full Name (Last, First, Middle Initial) Mailing Address 14417 SPRING DR City PROSPECT State KY Zip Code 40059 FEC ID number of contributing federal political committee. C Name of Employer American Income Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : C6830656</b> Amount of Each Receipt this Period 100.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		300.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶		

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

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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. PATRICIA MORGAN**

Mailing Address PO Box 208

City

Waco

State

TX

Zip Code

76703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : C6759435

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. PATRICIA MORGAN**

Mailing Address PO Box 208

City

Waco

State

TX

Zip Code

76703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		1	5		2	0	1	5		

Transaction ID : C6828916

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. 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 Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID : C6759151

Amount of Each Receipt this Period

300.00

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

600.00

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

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

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Eric J Neal**

Mailing Address 1355 Woodside Dr

City State Zip Code  
 Arnold MO 63010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6759152

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Eric J Neal**

Mailing Address 1355 Woodside Dr

City State Zip Code  
 Arnold MO 63010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6759153

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Eric J Neal**

Mailing Address 1355 Woodside Dr

City State Zip Code  
 Arnold MO 63010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828672

Amount of Each Receipt this Period

300.00

**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  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. 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 Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828673

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. 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 Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828674

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. COREY A NEFF**

Mailing Address 2728 PORT OF CALL DR

City

LAS VEGAS

State

NV

Zip Code

89128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6761927

Amount of Each Receipt this Period

100.00

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 122 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. COREY A NEFF**

Mailing Address 2728 PORT OF CALL DR

City State Zip Code  
LAS VEGAS NV 89128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6761928

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. COREY A NEFF**

Mailing Address 2728 PORT OF CALL DR

City State Zip Code  
LAS VEGAS NV 89128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6761929

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. COREY A NEFF**

Mailing Address 2728 PORT OF CALL DR

City State Zip Code  
LAS VEGAS NV 89128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6830788

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

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(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. COREY A NEFF**

Mailing Address 2728 PORT OF CALL DR

City State Zip Code  
LAS VEGAS NV 89128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6830789

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. COREY A NEFF**

Mailing Address 2728 PORT OF CALL DR

City State Zip Code  
LAS VEGAS NV 89128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6830790

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. DORIAN S OLDHAM**

Mailing Address 3831 N MULBERRY DR #3403

City State Zip Code  
KANSAS CITY MO 64116

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6759617

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. DORIAN S OLDHAM**

Mailing Address 3831 N MULBERRY DR #3403

City  
KANSAS CITY

State Zip Code  
MO 64116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759618

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. DORIAN S OLDHAM**

Mailing Address 3831 N MULBERRY DR #3403

City  
KANSAS CITY

State Zip Code  
MO 64116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759619

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. DORIAN S OLDHAM**

Mailing Address 3831 N MULBERRY DR #3403

City  
KANSAS CITY

State Zip Code  
MO 64116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6829079

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 125 OF 196

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. DORIAN S OLDHAM**

Mailing Address 3831 N MULBERRY DR #3403

City  
KANSAS CITY

State Zip Code  
MO 64116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6829080

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. DORIAN S OLDHAM**

Mailing Address 3831 N MULBERRY DR #3403

City  
KANSAS CITY

State Zip Code  
MO 64116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6829081

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**c. Durhon Oldham**

Mailing Address PO Box 208

City  
Waco

State Zip Code  
TX 76703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6759198

Amount of Each Receipt this Period

1200.00

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

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

1400.00

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

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

FOR LINE NUMBER: PAGE 126 OF 196  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Durhon Oldham**

Mailing Address PO Box 208

City State Zip Code  
Waco TX 76703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

National Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828720

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

**B. 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 Insurance

Occupation

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 Y  
01 / 21 / 2015

Transaction ID : C6759585

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**C. ROBERT OLSON JR**

Mailing Address 26561 W HIGHLAND DR

City State Zip Code  
CHANNAHON IL 60410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

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 Y  
01 / 21 / 2015

Transaction ID : C6759586

Amount of Each Receipt this Period

400.00

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

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

1600.00

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

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

FOR LINE NUMBER: PAGE 127 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. ROBERT OLSON JR**

Mailing Address 26561 W HIGHLAND DR

City State Zip Code  
 CHANNAHON IL 60410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759587

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**B. ROBERT OLSON JR**

Mailing Address 26561 W HIGHLAND DR

City State Zip Code  
 CHANNAHON IL 60410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6829051

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**C. ROBERT OLSON JR**

Mailing Address 26561 W HIGHLAND DR

City State Zip Code  
 CHANNAHON IL 60410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6829052

Amount of Each Receipt this Period

400.00

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

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

1200.00

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

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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. ROBERT OLSON JR**

Mailing Address 26561 W HIGHLAND DR

City  
CHANNAHONState  
IL Zip Code  
60410FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6829053

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**B. Laurie Onasch**

Mailing Address 632 Moraine Ct

City  
ColgateState  
WI Zip Code  
53017FEC 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 ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6758514

Amount of Each Receipt this Period

180.00

Full Name (Last, First, Middle Initial)

**C. Laurie Onasch**

Mailing Address 632 Moraine Ct

City  
ColgateState  
WI Zip Code  
53017FEC 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 ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6828078

Amount of Each Receipt this Period

180.00

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

760.00

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 129 OF 196  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

### A. CHAD T PANZER

Mailing Address 302 EAGLE POINT

City State Zip Code  
COLUMBIA SC 29229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6760578

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

### B. CHAD T PANZER

Mailing Address 302 EAGLE POINT

City State Zip Code  
COLUMBIA SC 29229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6760579

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

### C. CHAD T PANZER

Mailing Address 302 EAGLE POINT

City State Zip Code  
COLUMBIA SC 29229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6760580

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. CHAD T PANZER**

Mailing Address 302 EAGLE POINT

City	State	Zip Code
COLUMBIA	SC	29229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6829849

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. CHAD T PANZER**

Mailing Address 302 EAGLE POINT

City	State	Zip Code
COLUMBIA	SC	29229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6829850

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. CHAD T PANZER**

Mailing Address 302 EAGLE POINT

City	State	Zip Code
COLUMBIA	SC	29229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6829851

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

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(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. FRANCISCO PEREZ**

Mailing Address 1 LEE AVE

City State Zip Code  
 Providence RI 02904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation

Information Requested

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6767125

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. FRANCISCO PEREZ**

Mailing Address 1 LEE AVE

City State Zip Code  
 Providence RI 02904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation

Information Requested

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6767126

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. FRANCISCO PEREZ**

Mailing Address 1 LEE AVE

City State Zip Code  
 Providence RI 02904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation

Information Requested

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6767127

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. FRANCISCO M PEREZ**

Mailing Address 1 LEE AVE

City State Zip Code  
 NORTH PROVIDENCE RI 02904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 15 2015

Transaction ID : C6836635

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. FRANCISCO M PEREZ**

Mailing Address 1 LEE AVE

City State Zip Code  
 NORTH PROVIDENCE RI 02904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 15 2015

Transaction ID : C6836636

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. FRANCISCO M PEREZ**

Mailing Address 1 LEE AVE

City State Zip Code  
 NORTH PROVIDENCE RI 02904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 15 2015

Transaction ID : C6836637

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 133 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. PHILIP PRATA**

Mailing Address 207 GEORGE ST #405

City State Zip Code  
Middletown CT 06457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6765422

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. PHILIP PRATA**

Mailing Address 207 GEORGE ST #405

City State Zip Code  
Middletown CT 06457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6765423

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. PHILIP PRATA**

Mailing Address 207 GEORGE ST #405

City State Zip Code  
Middletown CT 06457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6765424

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 134 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. PHILIP PRATA**

Mailing Address 207 GEORGE ST #405

City State Zip Code  
MIDDLETOWN CT 06457

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6835015

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. PHILIP PRATA**

Mailing Address 207 GEORGE ST #405

City State Zip Code  
MIDDLETOWN CT 06457

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6835016

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. PHILIP PRATA**

Mailing Address 207 GEORGE ST #405

City State Zip Code  
MIDDLETOWN CT 06457

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6835017

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 135 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Scott J Rehberg**

Mailing Address 1153 Thistle Ln

City State Zip Code  
 Lebanon OH 45036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759112

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. Scott J Rehberg**

Mailing Address 1153 Thistle Ln

City State Zip Code  
 Lebanon OH 45036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759113

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. Scott J Rehberg**

Mailing Address 1153 Thistle Ln

City State Zip Code  
 Lebanon OH 45036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759114

Amount of Each Receipt this Period

80.00

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

240.00

**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 136 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. 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 Ins. Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 15 2015

Transaction ID : C6828633

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. 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 Ins. Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 15 2015

Transaction ID : C6828634

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**c. Scott J Rehberg**

Mailing Address 1153 Thistle Ln

City State Zip Code  
Lebanon OH 45036

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
American Income Life Ins. Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 15 2015

Transaction ID : C6828635

Amount of Each Receipt this Period

80.00

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

240.00

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



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 137 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Michael Richards**

Mailing Address 3818 SE Columbia Way

City	State	Zip Code
Vancouver	WA	98661-5575

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2015

Transaction ID : C6769620

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Michael Richards**

Mailing Address 3818 SE Columbia Way

City	State	Zip Code
Vancouver	WA	98661-5575

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2015

Transaction ID : C6795065

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Michael Richards**

Mailing Address 3818 SE Columbia Way

City	State	Zip Code
Vancouver	WA	98661-5575

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2015

Transaction ID : C6805893

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  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Michael Richards**

Mailing Address 3818 SE Columbia Way

City

Vancouver

State

WA

Zip Code

98661-5575

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2015

Transaction ID : C6839726

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Michael Richards**

Mailing Address 3818 SE Columbia Way

City

Vancouver

State

WA

Zip Code

98661-5575

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 12 / 2015

Transaction ID : C6843875

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Michael Richards**

Mailing Address 3818 SE Columbia Way

City

Vancouver

State

WA

Zip Code

98661-5575

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 24 / 2015

Transaction ID : C6862251

Amount of Each Receipt this Period

40.00

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

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

130.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Dovey Richter**

Mailing Address 7154 West Farrand Rd

City State Zip Code  
 Clio MI 48420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
International Union UAW

Occupation  
staff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2015

Transaction ID : C6794883

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Dovey Richter**

Mailing Address 7154 West Farrand Rd

City State Zip Code  
 Clio MI 48420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
International Union UAW

Occupation  
staff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2015

Transaction ID : C6811171

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Dovey Richter**

Mailing Address 7154 West Farrand Rd

City State Zip Code  
 Clio MI 48420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
International Union UAW

Occupation  
staff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 09 / 2015

Transaction ID : C6837462

Amount of Each Receipt this Period

50.00

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

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

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Dovey Richter**

Mailing Address 7154 West Farrand Rd

City	State	Zip Code
Clio	MI	48420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

International Union UAW

Occupation

staff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2015

Transaction ID : C6840354

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Dovey Richter**

Mailing Address 7154 West Farrand Rd

City	State	Zip Code
Clio	MI	48420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

International Union UAW

Occupation

staff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2015

Transaction ID : C6851197

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Edward D Rubio**

Mailing Address 15508 Sugar Loaf Dr

City	State	Zip Code
Edmond	OK	73013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6759188

Amount of Each Receipt this Period

100.00

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

225.00

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 141 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Edward D Rubio**

Mailing Address 15508 Sugar Loaf Dr

City State Zip Code  
Edmond OK 73013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759189

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Edward D Rubio**

Mailing Address 15508 Sugar Loaf Dr

City State Zip Code  
Edmond OK 73013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759190

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Edward D Rubio**

Mailing Address 15508 Sugar Loaf Dr

City State Zip Code  
Edmond OK 73013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6828711

Amount of Each Receipt this Period

100.00

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

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

300.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Edward D Rubio**

Mailing Address 15508 Sugar Loaf Dr

City

Edmond

State

OK

Zip Code

73013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828712

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Edward D Rubio**

Mailing Address 15508 Sugar Loaf Dr

City

Edmond

State

OK

Zip Code

73013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828713

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Tamara Rubyn**

Mailing Address PO Box 149

City

Carmichael

State

CA

Zip Code

95609-0149

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

President/Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 13 / 2015

Transaction ID : C6756813

Amount of Each Receipt this Period

50.00

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

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

250.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. Tamara Rubyn**

Mailing Address PO Box 149

City State Zip Code  
 Carmichael CA 95609-0149

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

President/Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2015

Transaction ID : C6801257

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **B. Tamara Rubyn**

Mailing Address PO Box 149

City State Zip Code  
 Carmichael CA 95609-0149

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

President/Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2015

Transaction ID : C6811338

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **C. Tamara Rubyn**

Mailing Address PO Box 149

City State Zip Code  
 Carmichael CA 95609-0149

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

President/Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2015

Transaction ID : C6840498

Amount of Each Receipt this Period

40.00

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

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

120.00

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

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

FOR LINE NUMBER: PAGE 144 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Tamara Rubyn**

Mailing Address PO Box 149

City State Zip Code  
Carmichael CA 95609-0149

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
LOCAL 29 President/Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 20 / 2015

Transaction ID : C6849635

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Tamara Rubyn**

Mailing Address PO Box 149

City State Zip Code  
Carmichael CA 95609-0149

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
LOCAL 29 President/Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 24 / 2015

Transaction ID : C6861753

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Paul D Rumbuc**

Mailing Address 3570 Magnolia Ct

City State Zip Code  
Oakland Township MI 48363

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 ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6758505

Amount of Each Receipt this Period

400.00

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

490.00

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



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

Use separate schedule(s)  
for each category of the  
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

## **A. Paul D Rumbuc**

Mailing Address 3570 Magnolia 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 ▼

800.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6758506

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

## **B. Patricia Sanchez**

Mailing Address PO Box 14841

City State Zip Code  
 Oakland CA 94614-0841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Secretary-Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.00

Date of Receipt

01 / 13 / 2015

Transaction ID : C6756816

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. Patricia Sanchez**

Mailing Address PO Box 14841

City State Zip Code  
 Oakland CA 94614-0841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Secretary-Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.00

Date of Receipt

02 / 24 / 2015

Transaction ID : C6801259

Amount of Each Receipt this Period

40.00

**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  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Patricia Sanchez**

Mailing Address PO Box 14841

City State Zip Code  
Oakland CA 94614-0841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Secretary-Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2015

Transaction ID : C6811340

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Patricia Sanchez**

Mailing Address PO Box 14841

City State Zip Code  
Oakland CA 94614-0841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Secretary-Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2015

Transaction ID : C6840500

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Patricia Sanchez**

Mailing Address PO Box 14841

City State Zip Code  
Oakland CA 94614-0841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Secretary-Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2015

Transaction ID : C6849669

Amount of Each Receipt this Period

3.00

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

83.00

**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  
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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Patricia Sanchez**

Mailing Address PO Box 14841

City

Oakland

State

CA

Zip Code

94614-0841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Secretary-Treasurer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

263.00

Date of Receipt

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

Transaction ID : C6849637

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Patricia Sanchez**

Mailing Address PO Box 14841

City

Oakland

State

CA

Zip Code

94614-0841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 29

Occupation

Secretary-Treasurer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	4		2	0	1	5		

Transaction ID : C6861755

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Aaron Sanders**

Mailing Address 464 Grand woods 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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : C6801212

Amount of Each Receipt this Period

250.00

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)  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Melvin S Schwarzwald**

Mailing Address 2950 Warrensville Center Rd

City State Zip Code  
 Shaker Heights OH 44122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Schwarzwald & McNair

Occupation

OPEIU Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 09 / 2015

Transaction ID : C6756488

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Melvin S Schwarzwald**

Mailing Address 2950 Warrensville Center Rd

City State Zip Code  
 Shaker Heights OH 44122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Schwarzwald & McNair

Occupation

OPEIU Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 29 / 2015

Transaction ID : C6851265

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Joe Serrano**

Mailing Address 6070 Gateway E  
 Suite 5006

City State Zip Code  
 El Paso TX 79905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

local 4873

Occupation

Bus. Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

01 / 09 / 2015

Transaction ID : C6756522

Amount of Each Receipt this Period

50.00

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

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

550.00

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Joe Serrano**

Mailing Address 6070 Gateway E  
Suite 5006

City State Zip Code  
El Paso TX 79905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

local 4873

Occupation

Bus. Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2015

Transaction ID : C6794710

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Joe Serrano**

Mailing Address 6070 Gateway E  
Suite 5006

City State Zip Code  
El Paso TX 79905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

local 4873

Occupation

Bus. Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2015

Transaction ID : C6810312

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Joe Serrano**

Mailing Address 6070 Gateway E  
Suite 5006

City State Zip Code  
El Paso TX 79905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

local 4873

Occupation

Bus. Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

Transaction ID : C6813226

Amount of Each Receipt this Period

50.00

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

150.00

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

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Joe Serrano**

Mailing Address 6070 Gateway E  
Suite 5006

City State Zip Code  
El Paso TX 79905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

local 4873

Occupation

Bus. Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 04 / 2015

Transaction ID : C6849743

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Joe Serrano**

Mailing Address 6070 Gateway E  
Suite 5006

City State Zip Code  
El Paso TX 79905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

local 4873

Occupation

Bus. Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 02 / 2015

Transaction ID : C6854158

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Donna Shaffer**

Mailing Address 17609 N 8th Ave

City State Zip Code  
Phoenix AZ 85023-2604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 30 / 2015

Transaction ID : C6793959

Amount of Each Receipt this Period

38.48

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

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

138.48

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Donna Shaffer**

Mailing Address 17609 N 8th Ave

City State Zip Code  
 Phoenix AZ 85023-2604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2015

Transaction ID : C6801203

Amount of Each Receipt this Period

38.48

Full Name (Last, First, Middle Initial)

**B. Donna Shaffer**

Mailing Address 17609 N 8th Ave

City State Zip Code  
 Phoenix AZ 85023-2604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2015

Transaction ID : C6810236

Amount of Each Receipt this Period

38.48

Full Name (Last, First, Middle Initial)

**C. Donna Shaffer**

Mailing Address 17609 N 8th Ave

City State Zip Code  
 Phoenix AZ 85023-2604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2015

Transaction ID : C6841599

Amount of Each Receipt this Period

57.72

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

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

134.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Donna Shaffer**

Mailing Address 17609 N 8th Ave

City

Phoenix

State

AZ

Zip Code

85023-2604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

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

Transaction ID : C6851279

Amount of Each Receipt this Period

38.48

Full Name (Last, First, Middle Initial)

**B. Donna Shaffer**

Mailing Address 17609 N 8th Ave

City

Phoenix

State

AZ

Zip Code

85023-2604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

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

Transaction ID : C6862820

Amount of Each Receipt this Period

38.48

Full Name (Last, First, Middle Initial)

**C. Beth E Snow**

Mailing Address 4313 Whitehoof Way

City

Antioch

State

CA

Zip Code

94531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

Transaction ID : C6759115

Amount of Each Receipt this Period

80.00

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

156.96

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



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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Beth E Snow**

Mailing Address 4313 Whitehoof Way

City State Zip Code  
Antioch CA 94531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759116

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. Beth E Snow**

Mailing Address 4313 Whitehoof Way

City State Zip Code  
Antioch CA 94531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759117

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. Beth E Snow**

Mailing Address 4313 Whitehoof Way

City State Zip Code  
Antioch CA 94531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6828636

Amount of Each Receipt this Period

80.00

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

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

240.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Beth E Snow**

Mailing Address 4313 Whitehoof Way

City State Zip Code  
 Antioch CA 94531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828637

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. Beth E Snow**

Mailing Address 4313 Whitehoof Way

City State Zip Code  
 Antioch CA 94531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828638

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. CURT D SNOW**

Mailing Address 1920 KENT DR

City State Zip Code  
 BRENTWOOD CA 94513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6761450

Amount of Each Receipt this Period

80.00

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

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

240.00

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

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

FOR LINE NUMBER: PAGE 155 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. CURT D SNOW**

Mailing Address 1920 KENT DR

City State Zip Code  
 BRENTWOOD CA 94513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6761451

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. CURT D SNOW**

Mailing Address 1920 KENT DR

City State Zip Code  
 BRENTWOOD CA 94513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6761452

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. CURT D SNOW**

Mailing Address 1920 KENT DR

City State Zip Code  
 BRENTWOOD CA 94513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6830477

Amount of Each Receipt this Period

80.00

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

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

240.00

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

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

FOR LINE NUMBER: PAGE 156 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. CURT D SNOW**

Mailing Address 1920 KENT DR

City State Zip Code  
BRENTWOOD CA 94513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6830478

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. CURT D SNOW**

Mailing Address 1920 KENT DR

City State Zip Code  
BRENTWOOD CA 94513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6830479

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. ERICK S SNYDER**

Mailing Address 1132 SELMER RD

City State Zip Code  
PHILADELPHIA PA 19116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6761142

Amount of Each Receipt this Period

83.00

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

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

243.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 157 OF 196

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. ERICK S SNYDER**

Mailing Address 1132 SELMER RD

City

PHILADELPHIA

State

PA

Zip Code

19116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6761143

Amount of Each Receipt this Period

83.00

Full Name (Last, First, Middle Initial)

**B. ERICK S SNYDER**

Mailing Address 1132 SELMER RD

City

PHILADELPHIA

State

PA

Zip Code

19116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6761144

Amount of Each Receipt this Period

83.00

Full Name (Last, First, Middle Initial)

**C. ERICK S SNYDER**

Mailing Address 1132 SELMER RD

City

PHILADELPHIA

State

PA

Zip Code

19116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6830262

Amount of Each Receipt this Period

83.00

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

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

249.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 158 OF 196

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

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Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. ERICK S SNYDER**

Mailing Address 1132 SELMER RD

City

PHILADELPHIA

State

PA

Zip Code

19116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6830266

Amount of Each Receipt this Period

83.00

Full Name (Last, First, Middle Initial)

**B. ERICK S SNYDER**

Mailing Address 1132 SELMER RD

City

PHILADELPHIA

State

PA

Zip Code

19116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6830267

Amount of Each Receipt this Period

83.00

Full Name (Last, First, Middle Initial)

**C. Scott E Sonnenberg**

Mailing Address 236 Leaf Ln

City

Alabaster

State

AL

Zip Code

35007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759133

Amount of Each Receipt this Period

100.00

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

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

266.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Scott E Sonnenberg**

Mailing Address 236 Leaf Ln

City

Alabaster

State

AL

Zip Code

35007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759134

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Scott E Sonnenberg**

Mailing Address 236 Leaf Ln

City

Alabaster

State

AL

Zip Code

35007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759135

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Scott E Sonnenberg**

Mailing Address 236 Leaf Ln

City

Alabaster

State

AL

Zip Code

35007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6828654

Amount of Each Receipt this Period

100.00

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

300.00

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

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

PAGE 160 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Scott E Sonnenberg**

Mailing Address 236 Leaf Ln

City

Alabaster

State

AL

Zip Code

35007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6828655

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Scott E Sonnenberg**

Mailing Address 236 Leaf Ln

City

Alabaster

State

AL

Zip Code

35007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6828656

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JOHN C SPARBY**

Mailing Address 1731 HICKORY HILL DR

City

EAGAN

State

MN

Zip Code

55122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6759394

Amount of Each Receipt this Period

40.00

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

240.00

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 161 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JOHN C SPARBY**

Mailing Address 1731 HICKORY HILL DR

City State Zip Code  
EAGAN MN 55122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6759395

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. JOHN C SPARBY**

Mailing Address 1731 HICKORY HILL DR

City State Zip Code  
EAGAN MN 55122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6759396

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. JOHN C SPARBY**

Mailing Address 1731 HICKORY HILL DR

City State Zip Code  
EAGAN MN 55122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828882

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:  
(check only one)

PAGE 162 OF 196

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JOHN C SPARBY**

Mailing Address 1731 HICKORY HILL DR

City  
EAGAN

State Zip Code  
MN 55122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Ins.

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828883

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. JOHN C SPARBY**

Mailing Address 1731 HICKORY HILL DR

City  
EAGAN

State Zip Code  
MN 55122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Ins.

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828884

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. James M Surace**

Mailing Address 12301 Ridge Rd

City  
Cleveland

State Zip Code  
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 ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6758665

Amount of Each Receipt this Period

416.00

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

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

496.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 163 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. James M Surace**

Mailing Address 12301 Ridge Rd

City	State	Zip Code
Cleveland	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 ▼

2496.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	21	/	2015

Transaction ID : C6758666

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

**B. James M Surace**

Mailing Address 12301 Ridge Rd

City	State	Zip Code
Cleveland	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 ▼

2496.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	21	/	2015

Transaction ID : C6758667

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

**C. James M Surace**

Mailing Address 12301 Ridge Rd

City	State	Zip Code
Cleveland	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 ▼

2496.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	15	/	2015

Transaction ID : C6828219

Amount of Each Receipt this Period

416.00

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

1248.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. James M Surace**

Mailing Address 12301 Ridge Rd

City

Cleveland

State

OH

Zip Code

44133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828220

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

**B. James M Surace**

Mailing Address 12301 Ridge Rd

City

Cleveland

State

OH

Zip Code

44133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828221

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

**c. Sharon Taylor**

Mailing Address 1412 Hess Ave

City

Lansing

State

MI

Zip Code

48910-1339

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Local 459

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2015

Transaction ID : C6801216

Amount of Each Receipt this Period

200.00

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

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

1032.00

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

 Use separate schedule(s)  
 for each category of the  
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 (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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Sharon Taylor**

Mailing Address 1412 Hess Ave

City	State	Zip Code
Lansing	MI	48910-1339

FEC ID number of contributing federal political committee.

C

Name of Employer

Local 459

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2015

Transaction ID : C6809753

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Sharon Taylor**

Mailing Address 1412 Hess Ave

City	State	Zip Code
Lansing	MI	48910-1339

FEC ID number of contributing federal political committee.

C

Name of Employer

Local 459

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2015

Transaction ID : C6849814

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JEFFERY P THIEL**

Mailing Address 116 VLASIS DR

City	State	Zip Code
BALLWIN	MO	63011

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 M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6760218

Amount of Each Receipt this Period

100.00

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

215.00

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JEFFERY P THIEL**

Mailing Address 116 VLASIS DR

City

BALLWIN

State

MO

Zip Code

63011

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

01 / 21 / 2015

Transaction ID : C6760219

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JEFFERY P THIEL**

Mailing Address 116 VLASIS DR

City

BALLWIN

State

MO

Zip Code

63011

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

01 / 21 / 2015

Transaction ID : C6760220

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JEFFERY P THIEL**

Mailing Address 116 VLASIS DR

City

BALLWIN

State

MO

Zip Code

63011

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

04 / 15 / 2015

Transaction ID : C6829577

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JEFFERY P THIEL**

Mailing Address 116 VLASIS DR

City  
BALLWIN

State Zip Code  
MO 63011

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 Y Y  
04 / 15 / 2015

Transaction ID : C6829578

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JEFFERY P THIEL**

Mailing Address 116 VLASIS DR

City  
BALLWIN

State Zip Code  
MO 63011

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 Y Y  
04 / 15 / 2015

Transaction ID : C6829579

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Becky Turner**

Mailing Address 704 Royal View Ct

City  
Weatherford

State Zip Code  
TX 76086

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOCAL 277

Occupation  
President/Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2015

Transaction ID : C6801237

Amount of Each Receipt this Period

250.00

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

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

450.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. DANIEL UMBERTONE**

Mailing Address 4701 LAKE LAND DR #29-E

City State Zip Code  
 FLOWOOD MS 39232

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 ▼

404.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6762780

Amount of Each Receipt this Period

2.00

Full Name (Last, First, Middle Initial)

**B. DANIEL UMBERTONE**

Mailing Address 4701 LAKE LAND DR #29-E

City State Zip Code  
 FLOWOOD MS 39232

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 ▼

404.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6762781

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. DANIEL UMBERTONE**

Mailing Address 4701 LAKE LAND DR #29-E

City State Zip Code  
 FLOWOOD MS 39232

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 ▼

404.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6762782

Amount of Each Receipt this Period

2.00

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

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

104.00



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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. DANIEL UMBERTONE**

Mailing Address 4701 LAKELAND DR #29-E

City State Zip Code  
 FLOWOOD MS 39232

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 ▼

404.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6831174

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. DANIEL UMBERTONE**

Mailing Address 4701 LAKELAND DR #29-E

City State Zip Code  
 FLOWOOD MS 39232

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 ▼

404.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6831175

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. DANIEL UMBERTONE**

Mailing Address 4701 LAKELAND DR #29-E

City State Zip Code  
 FLOWOOD MS 39232

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 ▼

404.00

Date of Receipt

04 / 15 / 2015

Transaction ID : C6831176

Amount of Each Receipt this Period

100.00

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

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

300.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Denice Washington**

Mailing Address 1545 69th Ave

City State Zip Code  
Oakland CA 94621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU Local 29

Occupation

Business Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

01 / 13 / 2015

Transaction ID : C6756822

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Denice Washington**

Mailing Address 1545 69th Ave

City State Zip Code  
Oakland CA 94621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU Local 29

Occupation

Business Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

02 / 24 / 2015

Transaction ID : C6801265

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Denice Washington**

Mailing Address 1545 69th Ave

City State Zip Code  
Oakland CA 94621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU Local 29

Occupation

Business Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

03 / 10 / 2015

Transaction ID : C6811347

Amount of Each Receipt this Period

40.00

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

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

130.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Denice Washington**

Mailing Address 1545 69th Ave

City State Zip Code  
Oakland CA 94621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU Local 29

Occupation

Business Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2015

Transaction ID : C6840506

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Denice Washington**

Mailing Address 1545 69th Ave

City State Zip Code  
Oakland CA 94621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU Local 29

Occupation

Business Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2015

Transaction ID : C6849659

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Denice Washington**

Mailing Address 1545 69th Ave

City State Zip Code  
Oakland CA 94621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU Local 29

Occupation

Business Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 20 / 2015

Transaction ID : C6849643

Amount of Each Receipt this Period

50.00

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

115.00

**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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Denice Washington**

Mailing Address 1545 69th Ave

City State Zip Code  
Oakland CA 94621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU Local 29

Occupation

Business Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

06 / 24 / 2015

Transaction ID : C6861761

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. JEREMY WELCH**

Mailing Address 5111 NATALIE DR

City State Zip Code  
BRYANT AR 72022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759525

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JEREMY WELCH**

Mailing Address 5111 NATALIE DR

City State Zip Code  
BRYANT AR 72022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759526

Amount of Each Receipt this Period

100.00

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

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

240.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JEREMY WELCH**

Mailing Address 5111 NATALIE DR

City  
BRYANT

State Zip Code  
AR 72022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6759527

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JEREMY WELCH**

Mailing Address 5111 NATALIE DR

City  
BRYANT

State Zip Code  
AR 72022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828995

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JEREMY WELCH**

Mailing Address 5111 NATALIE DR

City  
BRYANT

State Zip Code  
AR 72022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6828996

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JEREMY WELCH**

Mailing Address 5111 NATALIE DR

City  
BRYANTState  
ARZip Code  
72022FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Insurance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	5

Transaction ID : C6828997

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. SARA WELCH**

Mailing Address 27212 GATEWAY DR S #101

City

FARMINGTON HILLS

State

MI

Zip Code

48334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Insurance agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : C6766162

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. SARA WELCH**

Mailing Address 27212 GATEWAY DR S #101

City

FARMINGTON HILLS

State

MI

Zip Code

48334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income

Occupation

Insurance agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : C6766163

Amount of Each Receipt this Period

100.00

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

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

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 175 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. SARA WELCH**

Mailing Address 27212 GATEWAY DR S #101

City	State	Zip Code
FARMINGTON HILLS	MI	48334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

American Income

Insurance agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2015

Transaction ID : C6766164

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. 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

Sec.Treas./Bus. Mgr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : C6794680

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. 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

Sec.Treas./Bus. Mgr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2015

Transaction ID : C6811395

Amount of Each Receipt this Period

40.00

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

190.00

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 176 OF 196

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

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Jacqueline K White-Brown**

Mailing Address 128 W Olive Ave

City

Monrovia

State

CA

Zip Code

91016-3410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU LOCAL 537

Occupation

Sec.Treas./Bus. Mgr.

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

Transaction ID : C6813208

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Jacqueline K White-Brown**

Mailing Address 128 W Olive Ave

City

Monrovia

State

CA

Zip Code

91016-3410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU LOCAL 537

Occupation

Sec.Treas./Bus. Mgr.

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 07 / 2015

Transaction ID : C6849681

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Jacqueline K White-Brown**

Mailing Address 128 W Olive Ave

City

Monrovia

State

CA

Zip Code

91016-3410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU LOCAL 537

Occupation

Sec.Treas./Bus. Mgr.

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 02 / 2015

Transaction ID : C6854160

Amount of Each Receipt this Period

50.00

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

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

140.00



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

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

FOR LINE NUMBER: PAGE 177 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Cynthia J Wilhelmi**

Mailing Address 2912 S Louise Ave #105

City State Zip Code  
 Sioux Falls SD 57106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759136

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Cynthia J Wilhelmi**

Mailing Address 2912 S Louise Ave #105

City State Zip Code  
 Sioux Falls SD 57106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759137

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Cynthia J Wilhelmi**

Mailing Address 2912 S Louise Ave #105

City State Zip Code  
 Sioux Falls SD 57106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 21 / 2015

Transaction ID : C6759138

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 178 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Cynthia J Wilhelmi**

Mailing Address 2912 S Louise Ave #105

City State Zip Code  
 Sioux Falls SD 57106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828657

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Cynthia J Wilhelmi**

Mailing Address 2912 S Louise Ave #105

City State Zip Code  
 Sioux Falls SD 57106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828658

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Cynthia J Wilhelmi**

Mailing Address 2912 S Louise Ave #105

City State Zip Code  
 Sioux Falls SD 57106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2015

Transaction ID : C6828659

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 179 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. TOM WILLIAMS**

Mailing Address 2800 GATEWAY DR

City State Zip Code  
 POMPANO BEACH FL 33069

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 ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6760894

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. TOM WILLIAMS**

Mailing Address 2800 GATEWAY DR

City State Zip Code  
 POMPANO BEACH FL 33069

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 ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6760895

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. TOM WILLIAMS**

Mailing Address 2800 GATEWAY DR

City State Zip Code  
 POMPANO BEACH FL 33069

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 ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

Transaction ID : C6760896

Amount of Each Receipt this Period

200.00

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 180 OF 196

(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. TOM WILLIAMS**

Mailing Address 2800 GATEWAY DR

City State Zip Code  
POMPANO BEACH FL 33069

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 ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6830089

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. TOM WILLIAMS**

Mailing Address 2800 GATEWAY DR

City State Zip Code  
POMPANO BEACH FL 33069

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 ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6830090

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. TOM WILLIAMS**

Mailing Address 2800 GATEWAY DR

City State Zip Code  
POMPANO BEACH FL 33069

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 ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015

Transaction ID : C6830091

Amount of Each Receipt this Period

200.00

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

600.00

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

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

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<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JASON G YOUNG**

Mailing Address 4035 W 65TH ST #215

City	State	Zip Code
EDINA	MN	55435

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
01	/	21	/	2015

Transaction ID : C6763206

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JASON G YOUNG**

Mailing Address 4035 W 65TH ST #215

City	State	Zip Code
EDINA	MN	55435

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
01	/	21	/	2015

Transaction ID : C6763207

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JASON G YOUNG**

Mailing Address 4035 W 65TH ST #215

City	State	Zip Code
EDINA	MN	55435

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
01	/	21	/	2015

Transaction ID : C6763208

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

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(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. JASON G YOUNG**

Mailing Address 4035 W 65TH ST #215

City State Zip Code  
 EDINA MN 55435

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 Y Y  
 04 / 15 / 2015

Transaction ID : C6831365

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JASON G YOUNG**

Mailing Address 4035 W 65TH ST #215

City State Zip Code  
 EDINA MN 55435

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 Y Y  
 04 / 15 / 2015

Transaction ID : C6831366

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JASON G YOUNG**

Mailing Address 4035 W 65TH ST #215

City State Zip Code  
 EDINA MN 55435

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 Y Y  
 04 / 15 / 2015

Transaction ID : C6831367

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

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(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Wilma Zimmerman**

Mailing Address PO Box 22699

City State Zip Code  
 Savannah GA 31403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU Local 4873

Occupation

Rep (KY)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

01 / 09 / 2015

Transaction ID : C6756521

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Wilma Zimmerman**

Mailing Address PO Box 22699

City State Zip Code  
 Savannah GA 31403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU Local 4873

Occupation

Rep (KY)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

02 / 05 / 2015

Transaction ID : C6794711

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Wilma Zimmerman**

Mailing Address PO Box 22699

City State Zip Code  
 Savannah GA 31403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU Local 4873

Occupation

Rep (KY)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 05 / 2015

Transaction ID : C6810313

Amount of Each Receipt this Period

50.00

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 184 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Wilma Zimmerman**

Mailing Address PO Box 22699

City State Zip Code  
Savannah GA 31403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU Local 4873

Occupation

Rep (KY)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

Transaction ID : C6813225

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Wilma Zimmerman**

Mailing Address PO Box 22699

City State Zip Code  
Savannah GA 31403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU Local 4873

Occupation

Rep (KY)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 04 / 2015

Transaction ID : C6849742

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Wilma Zimmerman**

Mailing Address PO Box 22699

City State Zip Code  
Savannah GA 31403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OPEIU Local 4873

Occupation

Rep (KY)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 02 / 2015

Transaction ID : C6854159

Amount of Each Receipt this Period

50.00

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

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

150.00



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

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

FOR LINE NUMBER: PAGE 185 OF 196  
(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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. DAVID S ZOPHIN**

Mailing Address 2800 GATEWAY DR

City State Zip Code  
POMPANO BEACH FL 33069

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 ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6760886

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. DAVID S ZOPHIN**

Mailing Address 2800 GATEWAY DR

City State Zip Code  
POMPANO BEACH FL 33069

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 ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6760887

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. DAVID S ZOPHIN**

Mailing Address 2800 GATEWAY DR

City State Zip Code  
POMPANO BEACH FL 33069

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 ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6760890

Amount of Each Receipt this Period

200.00

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

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

600.00

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

PAGE 186 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. DAVID S ZOPHIN**

Mailing Address 2800 GATEWAY DR

City	State	Zip Code
POMPANO BEACH	FL	33069

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 ▼

1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6830083

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. DAVID S ZOPHIN**

Mailing Address 2800 GATEWAY DR

City	State	Zip Code
POMPANO BEACH	FL	33069

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 ▼

1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6830084

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. DAVID S ZOPHIN**

Mailing Address 2800 GATEWAY DR

City	State	Zip Code
POMPANO BEACH	FL	33069

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 ▼

1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : C6830085

Amount of Each Receipt this Period

200.00

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

600.00

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

66181.76



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

PAGE 188 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. ALEX SINK FOR CONGRESS**

Mailing Address PO BOX 17271

City CLEARWATER	State FL	Zip Code 33762
--------------------	-------------	-------------------

Purpose of Disbursement  
Congress, FL, 13

Candidate Name

ALEX SINK

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2015

Transaction ID : D359249

Amount of Each Disbursement this Period

-2000.00
----------

Full Name (Last, First, Middle Initial)

**B. BRALEY FOR IOWA**

Mailing Address PO BOX 856

City DES MOINES	State IA	Zip Code 50304
--------------------	-------------	-------------------

Purpose of Disbursement  
Senate, IA/UNCASHED/VOIDED

Candidate Name

BRUCE L BRALEY

Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2015

Transaction ID : D359712

Amount of Each Disbursement this Period

-2500.00
----------

Full Name (Last, First, Middle Initial)

**C. Mark Warner**

Mailing Address 2034 EISENHOWER AVENUE, SUITE 222

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Disbursement  
Senate, VA

Candidate Name

MARK ROBERT WARNER

Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2015

Transaction ID : D359261

Amount of Each Disbursement this Period

-5000.00
----------

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

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

-9500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 189 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Tim Bishop For Congress**

Mailing Address PO BOX 437

City	State	Zip Code
FARMINGVILLE	NY	11738

Purpose of Disbursement  
Congress, 1st, NY, Primary

Candidate Name

**TIMOTHY BISHOP**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2015

Transaction ID : D359269

Amount of Each Disbursement this Period

-2500.00
----------

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

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

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

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

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

-2500.00
----------

-12000.00
-----------

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

PAGE 190 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Bonilla for Senate**

Mailing Address 4425-C Treat Blvd #139

City	State	Zip Code
Concord	CA	94521

Purpose of Disbursement  
CA State Senate 7

Candidate Name

Susan Bonilla

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2015

Transaction ID : D358848

Amount of Each Disbursement this Period

580.00
--------

Full Name (Last, First, Middle Initial)

**B. Burke for Wisconsin**

Mailing Address PO Box 2479

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement  
Governor, WI, General

Candidate Name

Mary Burke

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2015

Transaction ID : D359254

Amount of Each Disbursement this Period

-1500.00
----------

Full Name (Last, First, Middle Initial)

**C. CITIBANK, F.S.B.**

Mailing Address 1101 Pennsylvania Avenue, N.W.

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2015

Transaction ID : D354647

Amount of Each Disbursement this Period

39.95
-------

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

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

-880.05
---------

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

PAGE 191 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. CITIBANK, F.S.B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Mailing Address 1101 Pennsylvania Avenue, N.W.

City	State	Zip Code
Washington	DC	20004

**Transaction ID : D359671**Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
-------------------

39.95
-------

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

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

Full Name (Last, First, Middle Initial)

**B. CITIBANK, F.S.B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Mailing Address 1101 Pennsylvania Avenue, N.W.

City	State	Zip Code
Washington	DC	20004

**Transaction ID : D359245**Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
-------------------

39.95
-------

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

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

Full Name (Last, First, Middle Initial)

**C. CITIBANK, F.S.B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Mailing Address 1101 Pennsylvania Avenue, N.W.

City	State	Zip Code
Washington	DC	20004

**Transaction ID : D359246**Purpose of Disbursement  
Bank Charges

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
-------------------

39.95
-------

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

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

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

119.85
--------

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

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

PAGE 192 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. CITIBANK, F.S.B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2015

Mailing Address 1101 Pennsylvania Avenue, N.W.

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement  
Bank Charges

Candidate Name

Category/  
Type**Transaction ID : D359987**

Amount of Each Disbursement this Period

39.95
-------

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

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

State: District:

Full Name (Last, First, Middle Initial)

**B. CITIBANK, F.S.B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Mailing Address 1101 Pennsylvania Avenue, N.W.

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement  
Bank Charges

Candidate Name

Category/  
Type**Transaction ID : D360495**

Amount of Each Disbursement this Period

39.95
-------

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

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

State: District:

Full Name (Last, First, Middle Initial)

**C. DelBane for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2015

Mailing Address PO Box 487

City	State	Zip Code
Bothell	WA	98041

Purpose of Disbursement  
US Representative, D1, WA

Candidate Name

011  
Category/  
Type**Transaction ID : D359258**

Amount of Each Disbursement this Period

-300.00
---------

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

Disbursement For:	2014
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

State: District:

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

-220.10
---------



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

PAGE 193 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Shaun Francis**

Mailing Address 12 Ascot Circle, Apt 6

City	State	Zip Code
Saratoga Springs	NY	12866

Purpose of Disbursement  
NY State Senate, Primary

Candidate Name

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

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2015

Transaction ID : D359984

Amount of Each Disbursement this Period

10300.00
----------

Full Name (Last, First, Middle Initial)

**B. Bob Gordon**

Mailing Address PO Box 14

City	State	Zip Code
Fair Lawn	NJ	07410

Purpose of Disbursement  
NJ Senate

Candidate Name

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

Disbursement For: 2015  
☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : D359980

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Jim Frazier For Assembly**Mailing Address 2401 Waterman Blvd #4  
PMB 104

City	State	Zip Code
Fairfield	CA	94533

Purpose of Disbursement  
11th District Assembly, CA

Candidate Name

Jim Frazier

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

Disbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2015

Transaction ID : D359988

Amount of Each Disbursement this Period

1500.00
---------

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

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

12300.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 194 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Jim Frazier For Assembly**Mailing Address 2401 Waterman Blvd #4  
PMB 104

City Fairfield State CA Zip Code 94533

Purpose of Disbursement  
11th District Assembly, CA

Candidate Name

**Jim Frazier**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2015

**Transaction ID : D353859**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Ken Keechl Campaign**

Mailing Address 612 NE 26th Street

City Fort Lauderdale State FL Zip Code 33305

Purpose of Disbursement  
Broward County Commission D7

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2015

**Transaction ID : D359256**

Amount of Each Disbursement this Period

-500.00
---------

Full Name (Last, First, Middle Initial)

**C. Magaly Prezeau Campaign**

Mailing Address 14900 SW 30th Street #278362

City Hollywood State FL Zip Code 33027

Purpose of Disbursement  
Commission, FL, Seat 4

Candidate Name

**Magaly Prezeau**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2015

**Transaction ID : D354176**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 195 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Norman Hemmings Campaign**

Mailing Address 9450 SW 18th St

City

Miramar

State

FL

Zip Code

33025-4723

Purpose of Disbursement

Commissioner, FL, Seat 1

011

Candidate Name

Norman Hemmings

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2015

☐ Primary☒ General☐ Other (specify) ▼

State: FL

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2015

Transaction ID : D354177

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Quinn For Illinois**

Mailing Address 676 N LaSalle Ste 340

City

Chicago

State

IL

Zip Code

60654

Purpose of Disbursement

Governor, IL

011

Candidate Name

Pat Quinn

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2014

☐ Primary☒ General☐ Other (specify) ▼

State: IL

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2015

Transaction ID : D359262

Amount of Each Disbursement this Period

-2500.00
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Full Name (Last, First, Middle Initial)

**C. Wayne Messam Campaign**

Mailing Address 3600 Red Road, Ste 303

City

Hollywood

State

FL

Zip Code

33025

Purpose of Disbursement

FL, Mayor

011

Candidate Name

Wayne Messam

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2015

☐ Primary☒ General☐ Other (specify) ▼

State: FL

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2015

Transaction ID : D354173

Amount of Each Disbursement this Period

1000.00
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SUBTOTAL of Disbursements This Page (optional)..... ►

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

-500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 196 OF 196

<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 (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Working Families for a Better SD to Support D Alvarez for Mayor 2014**

Mailing Address 3737 Camino Del Rio South, #403

City	State	Zip Code
San Diego	CA	92108

Purpose of Disbursement  
San Diego & Imperial Coun

Candidate Name

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

State: District:

Disbursement For: 2014

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2015

Transaction ID : D359247

Amount of Each Disbursement this Period

-2500.00
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**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

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

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**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

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

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

-2500.00
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9319.70
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