

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
UTILITY WORKERS UNION OF AMERICA COPE

ADDRESS (number and street) 815 16TH ST. NW  
 Check if different than previously reported. (ACC)  
WASHINGTON DC 20006

2. **FEC IDENTIFICATION NUMBER** C00040741  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 04 01 2011 through 04 30 2011

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 GARY RUFFNER

Signature of Treasurer Electronically Filed by GARY RUFFNER Date 05 20 2011

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							
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
UTILITY WORKERS UNION OF AMERICA COPE

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		24107.86
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	42497.94									
(c) Total Receipts (from Line 19) .....	17254.24	47985.87								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	59752.18	72093.73								
7. Total Disbursements (from Line 31) .....	6278.94	18620.49								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	53473.24	53473.24								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
UTILITY WORKERS UNION OF AMERICA COPE

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	4011.35	11293.29
(ii) Unitemized .....	13242.89	36692.58
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	17254.24	47985.87
(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) .....	17254.24	47985.87
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	17254.24	47985.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	17254.24	47985.87

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	28.94	125.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	28.94	125.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	4500.00	10500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	1750.00	7995.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	6278.94	18620.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6278.94	18620.49

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) .....	17254.24	47985.87
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17254.24	47985.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	28.94	125.49
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	28.94	125.49

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 6 / 22
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
UTILITY WORKERS UNION OF AMERICA COPE

<b>A.</b>	Full Name (Last, First, Middle Initial) GERARDO ACOSTA	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address 407 E SAINT JOHN ROAD	<b>Transaction ID:</b> SA11AI.8156
	City State Zip Code PHOENIX AZ 85022	Amount of Each Receipt this Period 109.66
	FEC ID number of contributing federal political committee. <b>C</b>	<b>PAYROLL DEDUCTION 54.83 PER PERIOD</b>
Name of Employer UTILITY WORKERS UNION OF AMERI	Occupation NATIONAL REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.64	

<b>B.</b>	Full Name (Last, First, Middle Initial) STEWART J. ACUFF	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address 8115 HARTFORD AVENUE	<b>Transaction ID:</b> SA11AI.8157
	City State Zip Code SILVER SPRING MD 20910	Amount of Each Receipt this Period 120.74
	FEC ID number of contributing federal political committee. <b>C</b>	<b>PAYROLL DEDUCTION 60.37 PER PERIOD</b>
Name of Employer UTILITY WORKERS UNION OF AMERI	Occupation CHIEF OF STAFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 482.96	

<b>C.</b>	Full Name (Last, First, Middle Initial) MARK BROOKS	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address 521 CENTRAL AVENUE	<b>Transaction ID:</b> SA11AI.8158
	City State Zip Code NASHVILLE TN 37211	Amount of Each Receipt this Period 109.66
	FEC ID number of contributing federal political committee. <b>C</b>	<b>PAYROLL DEDUCTION 54.83 PER PERIOD</b>
Name of Employer UTILITY WORKERS UNION	Occupation RESEARCHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.64	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>340.06</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 22  
(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)  
UTILITY WORKERS UNION OF AMERICA COPE

**A.**

Full Name (Last, First, Middle Initial)  
NOEL CHRISTMAS

Mailing Address 2508 PHEASANT HOLLOW DR

City State Zip Code  
PLAINSBORO NJ 08536

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 303.68

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.8140

Amount of Each Receipt this Period  
75.92

EX BOARD MEMBER MONTHLY CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
KELLY J. COOPER

Mailing Address 520 MCNEILAN ROAD

City State Zip Code  
WEST UNION OH 45693

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

Name of Employer Occupation  
UTILITY WORKERS UNION OF AMER DIRECTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 303.68

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.8133

Amount of Each Receipt this Period  
75.92

EX BOARD MEMBER MONTHLY CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
JOHN DEVLIN

Mailing Address 37 BRILL LANE

City State Zip Code  
POUGHQUAG NY 12570

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

Name of Employer Occupation  
UTILITY WORKERS UNION OF AMERICA NATIONAL REP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 438.64

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.8160

Amount of Each Receipt this Period  
109.66

PAYROLL DEDUCTION 54.83 PER PERIOD

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **261.50**

**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 8 / 22  
(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)  
**UTILITY WORKERS UNION OF AMERICA COPE**

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>PATRICK DILLON</b></p> <p>Mailing Address <b>3534 TWIN SPRUCE DRIVE</b></p> <p>City <b>KALAMAZOO</b> State <b>MI</b> Zip Code <b>49004</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer <b>MICHIGAN STATE UTILITY WORKERS</b> Occupation <b>PRESIDENT</b></p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">607.36</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p><b>Transaction ID: SA11AI.8141</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">151.84</span></p> <p><b>EX BOARD MEMBER MONTHLY CONTRIBUTION</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	9		2	0	1	1												

<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>JOHN DUFFY</b></p> <p>Mailing Address <b>286 HOWARD ST</b></p> <p>City <b>WASHINGTON TOWNSHI</b> State <b>NJ</b> Zip Code <b>07676</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer <b>UTILITY WORKERS UNION OF AMERI</b> Occupation <b>OFFICIER</b></p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">670.20</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p><b>Transaction ID: SA11AI.8161</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">167.55</span></p> <p><b>PAYROLL DEDUCTION</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	9		2	0	1	1												

<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>HARRY FARRELL</b></p> <p>Mailing Address <b>3503 WILLOW POND DRIVE</b></p> <p>City <b>RIVERHEAD</b> State <b>NY</b> Zip Code <b>15666</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">303.68</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p><b>Transaction ID: SA11AI.8142</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">75.92</span></p> <p><b>EX BOARD MEMBER MONTHLY CONTRIBUTION</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	9		2	0	1	1												

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">395.31</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 22

(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)  
UTILITY WORKERS UNION OF AMERICA COPE

**A.**

Full Name (Last, First, Middle Initial)  
ROBERT FARRELL

Mailing Address 18 GREENWAY DR

City State Zip Code  
FARMINGDALE NY 11735

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

Name of Employer Occupation  
LOCL 1-2, UWUA BUSINESS AGENT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 303.68

Date of Receipt

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

Transaction ID: SA11AI.8143

Amount of Each Receipt this Period

75.92

EXEC BOARD MEMBER MONTHLY CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
ARTURO FRIAS

Mailing Address 1317 MERCED AVENUE

City State Zip Code  
SOUTH EL MONTE CA 61733

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

Name of Employer Occupation  
SOUTHERN GAS

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 280.00

Date of Receipt

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

Transaction ID: SA11AI.8134

Amount of Each Receipt this Period

70.00

EX BOARD MEMBER MONTHLY CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
ROBERT N FRONEK

Mailing Address 6783 REID DRIVE

City State Zip Code  
PARMA HEIGHTS OH 44130

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

Name of Employer Occupation  
UTILITY WORKERS UNION OF AMER NATIONAL REPRESENTATIVE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 402.48

Date of Receipt

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

Transaction ID: SA11AI.8162

Amount of Each Receipt this Period

100.62

PAYROLL DEDUCTION 50.31 PER PERIOD

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

246.54

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

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

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

FOR LINE NUMBER: PAGE 10 / 22  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
UTILITY WORKERS UNION OF AMERICA COPE

**A.** Full Name (Last, First, Middle Initial)  
SHAWN GARVEY

Mailing Address 16 GRAND AVENUE

City LYNBROOK State NY Zip Code 11563

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 402.48

Date of Receipt: 04 / 29 / 2011  
**Transaction ID: SA11AI.8163**  
 Amount of Each Receipt this Period: 100.62  
 PAYROLL DEDUCTION 50.31 PER PERIOD

**B.** Full Name (Last, First, Middle Initial)  
JAMES GENNETT

Mailing Address 319 DIANA COURT

City BENSONVILLE State IL Zip Code 60106

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

Name of Employer UTILITY WORKERS UNION OF AMER Occupation NATIONAL REPRESENTATIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 402.48

Date of Receipt: 04 / 29 / 2011  
**Transaction ID: SA11AI.8164**  
 Amount of Each Receipt this Period: 100.62  
 PAYROLL DEDUCTION 50.31 PER PERIOD

**C.** Full Name (Last, First, Middle Initial)  
RICHARD HARKINS

Mailing Address 21557 SHEFFIELD

City FARMINGTON HILLS State MI Zip Code 48335

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 303.68

Date of Receipt: 04 / 29 / 2011  
**Transaction ID: SA11AI.8145**  
 Amount of Each Receipt this Period: 75.92  
 EX BOARD MEMBER MONTHLY CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 277.16

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 22  
(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)  
UTILITY WORKERS UNION OF AMERICA COPE

**A.**

Full Name (Last, First, Middle Initial)  
JAMES HARRISON

Mailing Address 3539 ARMOUR

City State Zip Code  
PORT HURON MI 48060

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

Name of Employer  
UTILITY WORKERS UNION OF AMERI

Occupation  
EXECUTIVE BOARD MEMBER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
820.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.8146

Amount of Each Receipt this Period  
205.00

EX BOARD MEMBER MONTHLY CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
TINA HAYNES

Mailing Address 208 ANGUELLO DR

City State Zip Code  
SALINAS CA 93907

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

Name of Employer  
LOCAL 511

Occupation  
EXEC BOARD MEMBER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
303.68

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.8135

Amount of Each Receipt this Period  
75.92

EX BOARD MEMBER MONTHLY CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
JOHN HOLLAND

Mailing Address 8 WALNUT STREET

City State Zip Code  
FOXBORO MA 02035

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

Name of Employer  
UTILITY WORKERS UNION OF AMERICA

Occupation  
REGIONAL DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
482.96

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.8166

Amount of Each Receipt this Period  
120.74

PAYROLL DEDUCTION 60.37 PER PERIOD

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **401.66**

**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 12 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
UTILITY WORKERS UNION OF AMERICA COPE

<b>A.</b>	Full Name (Last, First, Middle Initial) ROBERT HOUSER	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address 42 RAVENWOOD BLVD	<b>Transaction ID:</b> SA11AI.8167
	City State Zip Code BARNEGAT NJ 08005	Amount of Each Receipt this Period 109.66
	FEC ID number of contributing federal political committee. <b>C</b>	<b>PAYROLL DEDUCTION 54.83 PER PERIOD</b>
Name of Employer UTILITY WORKERS UNION OF AMERICA	Occupation NATIONAL ORGANIZER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.64	

<b>B.</b>	Full Name (Last, First, Middle Initial) DANIEL HURLEY	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address 101 ARBUTUS AVENUE	<b>Transaction ID:</b> SA11AI.8147
	City State Zip Code BRAintree MA 02184	Amount of Each Receipt this Period 75.92
	FEC ID number of contributing federal political committee. <b>C</b>	<b>EX BOARD MEMBER MONTHLY CONTRIBUTION</b>
Name of Employer UTILITY WORKERS UNION OF AMERI	Occupation EXECUTIVE BOARD MEMBER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 303.68	

<b>C.</b>	Full Name (Last, First, Middle Initial) LARRY KELLEY	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address 270 MANSFIELD RD	<b>Transaction ID:</b> SA11AI.8168
	City State Zip Code WASHINGTON PA 15301	Amount of Each Receipt this Period 73.32
	FEC ID number of contributing federal political committee. <b>C</b>	<b>PAYROLL DEDUCTION 36.66 PER PERIOD</b>
Name of Employer UTILITY WORKERS UNION OF AMERI	Occupation ORGANIZER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 219.96	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>258.90</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 13 / 22

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
UTILITY WORKERS UNION OF AMERICA COPE

**A.**

Full Name (Last, First, Middle Initial)  
ROBERT KOVAR

Mailing Address 214 N. ASH STREET

City State Zip Code  
CELINA OH 45822

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

Name of Employer Occupation  
LOCAL 308 PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 236.00

Date of Receipt

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

Transaction ID: SA11AI.8138

Amount of Each Receipt this Period

59.00

EX BOARD MEMBER MONTHLY CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
LEONIDAS LABELLE

Mailing Address 1977 YALE AVENUE

City State Zip Code  
WILLIAMSPORT PA 17701

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

Name of Employer Occupation  
UTILITY WORKERS UNION ORGANIZER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 402.48

Date of Receipt

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

Transaction ID: SA11AI.8169

Amount of Each Receipt this Period

100.62

PAYROLL DEDUCTION 50.31 PER PERIOD

**C.**

Full Name (Last, First, Middle Initial)  
DAVID LEONARDI

Mailing Address 1 PINE TREE CIRCLE

City State Zip Code  
SANDWICH MA 02563

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

Name of Employer Occupation  
LOCAL 270 EXEC BOARD MEMBER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 304.00

Date of Receipt

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

Transaction ID: SA11AI.8148

Amount of Each Receipt this Period

76.00

EX BOARD MEMBER MONTHLY CONTRIBUTION

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

235.62

**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 14 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
UTILITY WORKERS UNION OF AMERICA COPE

<b>A.</b>	Full Name (Last, First, Middle Initial) JAMES LEWIS	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address 2120 LONDERGRAN STREET	<b>Transaction ID:</b> SA11AI.8170
	City State Zip Code PITTSBURGH PA 15216	Amount of Each Receipt this Period 109.66
	FEC ID number of contributing federal political committee. <b>C</b>	PAYROLL DEDUCTION 54.83 PER PERIOD
	Name of Employer Occupation UTILITY WORKERS UNION OF AMERICA, AFL NATIONAL REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.64	

<b>B.</b>	Full Name (Last, First, Middle Initial) NANCY LOGAN	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address 2308 ARTHUR STREET	<b>Transaction ID:</b> SA11AI.8149
	City State Zip Code LOS ANGELES CA 90065	Amount of Each Receipt this Period 75.92
	FEC ID number of contributing federal political committee. <b>C</b>	EX BOARD MEMBER MNTHLY CONTRIBUTION
	Name of Employer Occupation LOCAL 132 EXEC BOARD MEMBER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 303.68	

<b>C.</b>	Full Name (Last, First, Middle Initial) ROBERT MAHONEY	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address 217 PONDEROSA DRIVE	<b>Transaction ID:</b> SA11AI.8171
	City State Zip Code HANOVER MA 02339	Amount of Each Receipt this Period 109.66
	FEC ID number of contributing federal political committee. <b>C</b>	PAYROLL DEDUCTION 54.83 PER PERIOD
	Name of Employer Occupation UTILITY WORKERS UNION OF AMERICA, AFL- NATIONAL ORGANIZER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.64	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>295.24</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 22  
(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)  
UTILITY WORKERS UNION OF AMERICA COPE

**A.**

Full Name (Last, First, Middle Initial)  
GEORGE MANOOGIAN

Mailing Address 1100 WESTBORO

City State Zip Code  
BIRMINGHAM MI 48009

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

Name of Employer  
UTILITY WORKERS UNION OF AMERICA

Occupation  
NATIONAL REP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
482.96

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

**Transaction ID:** SA11AI.8172

Amount of Each Receipt this Period  
120.74

PAYROLL DEDUCTION 60.37 PER PERIOD

**B.**

Full Name (Last, First, Middle Initial)  
RICHARD MATA

Mailing Address 3306 W. SUTTON RD

City State Zip Code  
LAPEER MI 48446

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

Name of Employer  
UTILITY WORKERS UNION OF AMERI

Occupation  
EXECUTIVE BOARD MEMBER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
402.48

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

**Transaction ID:** SA11AI.8173

Amount of Each Receipt this Period  
100.62

PAYROLL DEDUCTION 50.31 PER PERIOD

**C.**

Full Name (Last, First, Middle Initial)  
FRANK MEZMARICH SR

Mailing Address 4710 E. PLEASANT VALLEY ROAD

City State Zip Code  
INDEPENDENCE OH 44131

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

Name of Employer  
LOCAL 270

Occupation  
EXEC BOARD MEMBER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
436.80

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

**Transaction ID:** SA11AI.8150

Amount of Each Receipt this Period  
109.20

EX BOARD MEMBER MONTHLY CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **330.56**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 22  
(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)  
UTILITY WORKERS UNION OF AMERICA COPE

**A.**

Full Name (Last, First, Middle Initial)  
ANDREW O'CONNELL

Mailing Address 395 PELTON AVENUE

City State Zip Code  
STATEN ISLAND NY 10310

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

Name of Employer Occupation  
LOCAL 1-2 VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 303.68

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.8151

Amount of Each Receipt this Period  
75.92

EX BOARD MEMBER MONTHLY CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
DONALD OPATKA

Mailing Address 7559 ANCHOR LANE

City State Zip Code  
NORTHFIELD OH 44067

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

Name of Employer Occupation  
UTILITY WORKERS UNION OF AMERICA REGIONAL DIRECTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 482.96

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.8174

Amount of Each Receipt this Period  
120.74

PAYROLL DEDUCTION 60.37 PER PERIOD

**C.**

Full Name (Last, First, Middle Initial)  
LUCIA PAGANO

Mailing Address 2517 OAK CIRCLE

City State Zip Code  
LAKE ARIEL PA 18436

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

Name of Employer Occupation  
LOCAL 1-2 UWUA SEC.-TREASURER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 303.68

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.8152

Amount of Each Receipt this Period  
75.92

EX BOARD MEMBER MONTHLY CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **272.58**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 22  
(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)  
UTILITY WORKERS UNION OF AMERICA COPE

**A.**

Full Name (Last, First, Middle Initial)  
RICHARD PASSARELLI

Mailing Address 2347 WOODVIEW LANE

City State Zip Code  
NAPERVILLE IL 60565

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

Name of Employer Occupation  
INTEGRYS UWUA EXECUTIVE BOARD MEMBER

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 303.68

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.8153

Amount of Each Receipt this Period  
75.92

EX BOARD MEMBER MONTHLY CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
WILLIAM STERNER

Mailing Address 333 STATE STREET

City State Zip Code  
CHARLEROI PA 15022

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

Name of Employer Occupation  
UTILITY WORKERS UNION OF AMERICA EXECUTIVE BOARD MEMBER

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 402.48

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.8175

Amount of Each Receipt this Period  
100.62

PAYROLL DEDUCTION 50.31 PER PERIOD

**C.**

Full Name (Last, First, Middle Initial)  
SAM WEINSTEIN

Mailing Address 8219 FLOWER AVENUE

City State Zip Code  
TAKOMA PARK MD 20912-6858

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

Name of Employer Occupation  
UTILITY WORKERS UNION ASST TO THE PRESIDENT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 462.32

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.8176

Amount of Each Receipt this Period  
115.58

PAYROLL DEDUCTION 57.79 PER PERIOD

**SUBTOTAL** of Receipts This Page (optional) ..... ► **292.12**

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

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

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

FOR LINE NUMBER: PAGE 18 / 22

(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)  
UTILITY WORKERS UNION OF AMERICA COPE

**A.**

Full Name (Last, First, Middle Initial)  
RICHARD T WHALEN

Mailing Address 203 RESERVOIR RD

City State Zip Code  
MT PLEASANT PA 15666

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

Name of Employer Occupation  
ALLEGHENY ENERGY UTILITY WORKER

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

Date of Receipt

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

Transaction ID: SA11AI.8155

Amount of Each Receipt this Period

300.00
--------

EX BOARD MEMBER MONTHLY CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
CARL WOOD

Mailing Address 10103 LIVE OAK AVENUE

City State Zip Code  
CHERRY VALLEY CA 92223

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

Name of Employer Occupation  
UTLITY WORKERS UNION OF AMERIC LEGAL ADVISER TO PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 416.40

Date of Receipt

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

Transaction ID: SA11AI.8177

Amount of Each Receipt this Period

104.10
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PAYROLL DEDUCTION 52.05 PER PERIOD

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

404.10
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**TOTAL** This Period (last page this line number only) .....

4011.35
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 19 / 22

<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)  
UTILITY WORKERS UNION OF AMERICA COPE

A.	Full Name (Last, First, Middle Initial) LANGEVIN FOR CONGRESS	Transaction ID: SB23.8109
	Mailing Address 181A Knight Street	Date of Disbursement MM / DD / YYYY 04 / 06 / 2011
	City Warwick State RI Zip Code 02886	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) STABENOW FOR US SENATE	Transaction ID: SB23.8110
	Mailing Address PO BOX 4945	Date of Disbursement MM / DD / YYYY 04 / 06 / 2011
	City EAST LANSING State MI Zip Code 48826	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) STABENOW FOR US SENATE	Transaction ID: SB23.8183
	Mailing Address PO BOX 4945	Date of Disbursement MM / DD / YYYY 04 / 06 / 2011
	City EAST LANSING State MI Zip Code 48826	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement CONTRIBUTION Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 22

<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)  
UTILITY WORKERS UNION OF AMERICA COPE

A.

Full Name (Last, First, Middle Initial)  
WHITEHOUSE FOR US SENATE

Transaction ID: SB23.8108

Date of Disbursement

Mailing Address PO BOX 40280

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

City PROVIDENCE State RI Zip Code 02940

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: RI District:

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

1000.00
---------

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

4500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 22

<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

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)  
UTILITY WORKERS UNION OF AMERICA COPE

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>COMMITTEE FOR KOPAS</b></p> <p>Mailing Address 341 WILLOW CROSSING ROAD</p> <p>City GREENSBURG State PA Zip Code 15601</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.8113</p> <p>Date of Disbursement 04 / 11 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>COMMITTEE TO ELECT EARL KLEIM</b></p> <p>Mailing Address 418 RIDGE AVE</p> <p>City MONESSEN State PA Zip Code 15062</p> <p>Purpose of Disbursement CONTRIBUITION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.8114</p> <p>Date of Disbursement 04 / 11 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>COMMITTEE TO ELECT WAYNE E WATSON</b></p> <p>Mailing Address 746 GLENN STREET</p> <p>City CANONSBURG State PA Zip Code 15317</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.8111</p> <p>Date of Disbursement 04 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

1500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 22

<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)  
UTILITY WORKERS UNION OF AMERICA COPE

A.

Full Name (Last, First, Middle Initial)  
FRIENDS OF JOHN BOSSI

Transaction ID: SB29.8116

Date of Disbursement

Mailing Address 630 STAMFORD DR.

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

City Greensburg State PA Zip Code 15601

Amount of Each Disbursement this Period

250.00
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Purpose of Disbursement  
CONTRIBUTION

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Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

State: District:

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

250.00
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TOTAL This Period (last page this line number only) ..... ▶

1750.00
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