

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

AMALGAMATED TRANSIT UNION - COPE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		512200.08
(b) Cash on Hand at Beginning of Reporting Period.....	570531.43	
(c) Total Receipts (from Line 19)	72485.18	291412.90
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	643016.61	803612.98
7. Total Disbursements (from Line 31).....	43746.95	204343.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	599269.66	599269.66
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

AMALGAMATED TRANSIT UNION - COPE

Report Covering the Period: From: / / To: / /

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).....	1356.99	3685.67
(ii) Unitemized	71102.71	287526.82
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	72459.70	291212.49
(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)	72459.70	291212.49
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.).....	25.48	200.41
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))..... ▶	72485.18	291412.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	72485.18	291412.90

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	46.95	187.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	46.95	187.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	41700.00	169400.00
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	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	2000.00	34755.52
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)) ..	43746.95	204343.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	43746.95	204343.32

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)	72459.70	291212.49
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	72459.70	291212.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	46.95	187.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	46.95	187.80

**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 23
(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)
AMALGAMATED TRANSIT UNION - COPE

A. JACKIE L JETER
 Full Name (Last, First, Middle Initial)
 Mailing Address 711 HAACK PLACE
 City State Zip Code
 UPPER MARLBORO MD 20774-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WASH METRO AREA TRANSIT AUTH OPERATOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2014
Transaction ID : 6001432
 Amount of Each Receipt this Period
 75.00

B. Michael W. Breihan
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 244
 City State Zip Code
 ARNOLD MO 63010-0244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BI-STATE DEVELOPMENT AGENCY OPERATOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2014
Transaction ID : 6008612
 Amount of Each Receipt this Period
 30.00

C. PAUL KAPLAN
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 2561
 City State Zip Code
 BOCA RATON FL 33427-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PALM TRAN INC Operator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2014
Transaction ID : 6020034
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 7 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMALGAMATED TRANSIT UNION - COPE

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

Mailing Address 479 E 55TH STREET

City State Zip Code
KANSAS CITY MO 64110-2453

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

Name of Employer Occupation
KANSAS CITY AREA TRANS AUTH OTH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
194.40

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 14 / 2014
Transaction ID : 6020557

Amount of Each Receipt this Period
 38.88

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

Mailing Address 479 E 55TH STREET

City State Zip Code
KANSAS CITY MO 64110-2453

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

Name of Employer Occupation
KANSAS CITY AREA TRANS AUTH OTH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
233.28

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 14 / 2014
Transaction ID : 6020779

Amount of Each Receipt this Period
 38.88

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

Mailing Address 479 E 55TH STREET

City State Zip Code
KANSAS CITY MO 64110-2453

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

Name of Employer Occupation
KANSAS CITY AREA TRANS AUTH OTH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
272.16

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 14 / 2014
Transaction ID : 6020995

Amount of Each Receipt this Period
 38.88

SUBTOTAL of Receipts This Page (optional)..... ▶ 116.64

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 OF 23
(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)
AMALGAMATED TRANSIT UNION - COPE

A. VALARIE K GALLEGOS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3101 SE 10TH STREET
 City RENTON State WA Zip Code 98058-2932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 04 / 14 / 2014
Transaction ID : 6021363
 Amount of Each Receipt this Period 30.00

B. RICHARD M YOUNT
 Full Name (Last, First, Middle Initial)
 Mailing Address 4610 MERIDIAN AVENUE N
 City SEATTLE State WA Zip Code 98103-6936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.85

Date of Receipt 04 / 14 / 2014
Transaction ID : 6022005
 Amount of Each Receipt this Period 35.00

C. JOHN G CAMPANELLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 213 DOWNING ROAD
 City SOMERDALE State NJ Zip Code 08083-2615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AMALGAMATED TRANSIT UNION Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 04 / 17 / 2014
Transaction ID : 6022895
 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

FOR LINE NUMBER: PAGE 9 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMALGAMATED TRANSIT UNION - COPE

A. STEPHEN KNESTAUT
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 INDIAN ROAD
 City WEST DEPTFORD State NJ Zip Code 08096-3310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N J TRANSIT BUS OPERATIONS INC Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : 6022896
 Amount of Each Receipt this Period
 50.00

B. LAWRENCE J HANLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 5025 Wisconsin Ave NW
 City Washington State DC Zip Code 20016-4113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AMALGAMATED TRANSIT UNION Occupation INTERNATIONAL PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : 6023236
 Amount of Each Receipt this Period
 80.00

C. CLAUDIA HUDSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5025 Wisconsin Ave NW
 City Washington State DC Zip Code 20016-4113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AMALGAMATED TRANSIT UNION Occupation INTERNATIONAL VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : 6023237
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00
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 10 OF 23
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial) A. WILLIAM G MC LEAN		Date of Receipt
Mailing Address 5025 Wisconsin Ave NW		<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City Washington State DC Zip Code 20016-4113		Transaction ID : 6023241
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="83.34"/>
Name of Employer AMALGAMATED TRANSIT UNION	Occupation INTERNATIONAL VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) B. RICHARD MURPHY		Date of Receipt
Mailing Address 5025 Wisconsin Ave NW		<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City Washington State DC Zip Code 20016-4113		Transaction ID : 6023242
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="83.34"/>
Name of Employer AMALGAMATED TRANSIT UNION	Occupation INTERNATIONAL VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) C. YVETTE TRUJILLO		Date of Receipt
Mailing Address 5025 WISCONSIN AVE NW		<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City WASHINGTON State DC Zip Code 20016-4113		Transaction ID : 6023256
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer AMALGAMATED TRANSIT UNION	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="266.68"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

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

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NAME OF COMMITTEE (In Full)
AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)
A. PAUL B NEIL

Mailing Address 1701 157TH AVENUE NE
#A101

City State Zip Code
BELLEVUE WA 98008-2777

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

Name of Employer Occupation
KING COUNTY DOT-METRO TRANSIT OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 25 / 2014
Transaction ID : 6027985

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. PAUL J BACHTEL

Mailing Address 8513 MAIN STREET
#203

City State Zip Code
EDMONDS WA 98026-6940

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

Name of Employer Occupation
KING COUNTY DOT-METRO TRANSIT OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 25 / 2014
Transaction ID : 6027986

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. CLINTON C DEVOSS JR

Mailing Address 3225 GALVIN RD

City State Zip Code
CENTRALIA WA 98531-9061

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

Name of Employer Occupation
KING COUNTY DOT-METRO TRANSIT OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 25 / 2014
Transaction ID : 6027987

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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 12 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
AMALGAMATED TRANSIT UNION - COPE

A. JUDY J YOUNG
 Full Name (Last, First, Middle Initial)
 Mailing Address 7603 SOUTH 112TH STREET

City SEATTLE	State WA	Zip Code 98178-3227
-----------------	-------------	------------------------

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

Name of Employer KING COUNTY DOT-METRO TRANSIT	Occupation OPERATOR
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2014
Transaction ID : 6027988

Amount of Each Receipt this Period
 25.00

B. NEAL I SAFRIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 5451 NE 203RD PLACE

City LAKE FOREST PARK	State WA	Zip Code 98155-0000
--------------------------	-------------	------------------------

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

Name of Employer KING COUNTY DOT-METRO TRANSIT	Occupation OPERATOR
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2014
Transaction ID : 6027989

Amount of Each Receipt this Period
 25.00

C. Michael W. Breihan
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 244

City ARNOLD	State MO	Zip Code 63010-0244
----------------	-------------	------------------------

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

Name of Employer BI-STATE DEVELOPMENT AGENCY	Occupation OPERATOR
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 07 / 2014
Transaction ID : 6028228

Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)
A. Michael W. Breihan

Mailing Address **PO BOX 244**

City **ARNOLD** State **MO** Zip Code **63010-0244**

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

Name of Employer **BI-STATE DEVELOPMENT AGENCY** Occupation **OPERATOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
04 / 07 / 2014

Transaction ID : 6028231

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
B. MICHAEL J HARMS

Mailing Address **741 AGNEW ROAD**

City **PITTSBURGH** State **PA** Zip Code **15227-3802**

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

Name of Employer **PORT AUTH-ALLEG - PAT TRANSIT** Occupation **OPERATOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
04 / 24 / 2014

Transaction ID : 6030038

Amount of Each Receipt this Period
60.00

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

Mailing Address **2022 Chateau St.**

City **Pittsburgh** State **PA** Zip Code **15233-1139**

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

Name of Employer **AMALGAMATED TRANSIT UNION** Occupation **OPERATOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.35**

Date of Receipt
04 / 24 / 2014

Transaction ID : 6030350

Amount of Each Receipt this Period
41.67

SUBTOTAL of Receipts This Page (optional)..... ▶ **131.67**

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 Page

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

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NAME OF COMMITTEE (In Full)
AMALGAMATED TRANSIT UNION - COPE

A. MICHAEL THURMOND
 Full Name (Last, First, Middle Initial)
 Mailing Address 2022 Chateau St.
 City Pittsburgh State PA Zip Code 15233-1139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AMALGAMATED TRANSIT UNION Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 04 / 24 / 2014
Transaction ID : 6030565
 Amount of Each Receipt this Period 42.00

B. VALARIE K GALLEGOS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3101 SE 10TH STREET
 City RENTON State WA Zip Code 98058-2932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 28 / 2014
Transaction ID : 6033563
 Amount of Each Receipt this Period 30.00

C. RICHARD M YOUNT
 Full Name (Last, First, Middle Initial)
 Mailing Address 4610 MERIDIAN AVENUE N
 City SEATTLE State WA Zip Code 98103-6936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.85

Date of Receipt 04 / 28 / 2014
Transaction ID : 6034200
 Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional).....▶ 107.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMALGAMATED TRANSIT UNION - COPE

A. ERIC ST PIERRE
 Full Name (Last, First, Middle Initial)
 Mailing Address 46 HIGH STREET
 City WARWICK State RI Zip Code 02886-1256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2014
Transaction ID : 6035124
 Amount of Each Receipt this Period
 20.00

B. PAUL KAPLAN
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 2561
 City BOCA RATON State FL Zip Code 33427-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PALM TRAN INC Occupation Operator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2014
Transaction ID : 6052735
 Amount of Each Receipt this Period
 40.00

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	1356.99

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. Langevin For Congress

Mailing Address 181A Knight Street

City Warwick State RI Zip Code 02886

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. James Langevin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: RI District: 02

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2014

Transaction ID : 5976350

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Committee To Elect Martha Robertson; The

Mailing Address PO Box 54

City Dryden State NY Zip Code 13053

Purpose of Disbursement
Contribution

011

Candidate Name

Martha Robertson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 23

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Transaction ID : 6001495

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Friends Of Dan Maffei

Mailing Address PO Box 230

City Syracuse State NY Zip Code 13201

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Daniel Maffei

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 24

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Transaction ID : 6001496

Amount of Each Disbursement this Period

4000.00

Contribution

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

7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. Elizabeth For MA Inc

Mailing Address PO Box 290568

City Boston State MA Zip Code 02129

Purpose of Disbursement
Contribution

011

Candidate Name

Ms. Elizabeth Warren

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MA District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Transaction ID : 6001504

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Kurt Schrader For Congress

Mailing Address PO Box 3314

City Oregon City State OR Zip Code 97045

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Kurt Schrader

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OR District: 05

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Transaction ID : 6001505

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Doyle For Congress Committee

Mailing Address 205 Hawthorne Court

City Pittsburgh State PA Zip Code 15221

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Michael Doyle

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 14

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Transaction ID : 6001506

Amount of Each Disbursement this Period

1500.00

Contribution

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

5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. Cleaver For Congress

Mailing Address 4801 Main Street
Suite 1000

City Kansas City State MO Zip Code 64112

Purpose of Disbursement
Contribution

Candidate Name
Rep. Emanuel Cleaver II

Office Sought: House
 Senate
 President
State: MO District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 6009104

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

B. Rangel For Congress

Mailing Address PO Box 5577

City New York State NY Zip Code 10027

Purpose of Disbursement
Contribution

Candidate Name
Rep. Charles Rangel

Office Sought: House
 Senate
 President
State: NY District: 13

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 6009108

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

C. Cleaver For Congress

Mailing Address 4801 Main Street
Suite 1000

City Kansas City State MO Zip Code 64112

Purpose of Disbursement
Contribution

Candidate Name
Rep. Emanuel Cleaver II

Office Sought: House
 Senate
 President
State: MO District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 6009119

Amount of Each Disbursement this Period

Contribution

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

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. Hoyer For Congress

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

Candidate Name

Rep. Steny Hoyer

Office Sought: House
 Senate
 President
State: MD District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : 6009122

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Hoyer For Congress

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

Candidate Name

Rep. Steny Hoyer

Office Sought: House
 Senate
 President
State: MD District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : 6009123

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Katherine Clark For Congress

Mailing Address PO Box 361

City Malden State MA Zip Code 02148

Purpose of Disbursement
Contribution

Candidate Name

Rep. Katherine Clark

Office Sought: House
 Senate
 President
State: MA District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : 6009819

Amount of Each Disbursement this Period

2500.00

Contribution

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

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

7500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. Andre Carson For Congress

Mailing Address P.O. Box 1863

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Andre Carson

Category/
Type

Office Sought: House
 Senate
 President
State: IN District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2014

Transaction ID : 6019687

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Corbett For Congress

Mailing Address 555 Capitol Mall Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Contribution

011

Candidate Name

Ms. Ellen Corbett

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 15

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2014

Transaction ID : 6019688

Amount of Each Disbursement this Period

2600.00

Contribution

Full Name (Last, First, Middle Initial)

C. Cicilline Committee

Mailing Address One Park Row
Fifth Floor

City Providence State RI Zip Code 02903

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. David Cicilline

Category/
Type

Office Sought: House
 Senate
 President
State: RI District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2014

Transaction ID : 6027412

Amount of Each Disbursement this Period

1000.00

Contribution

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

6100.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. Defazio For Congress

Mailing Address PO Box 1316

City Springfield State OR Zip Code 97477

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Peter DeFazio

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OR District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	4

Transaction ID : 6027421

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Contribution

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	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

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

2	5	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

4	1	7	0	.	0	0
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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)

<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)
AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. Committee to Elect Stacey Rubain

Mailing Address PO Box 20992

City Winston-Salem State NC Zip Code 27120

Purpose of Disbursement
Stacey Rubain, SUPERIOR COURT JUDGE 21-A NC

Candidate Name
Stacey Rubain

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /
04 / 28 / 2014

Transaction ID : 6027583

Amount of Each Disbursement this Period

2000.00

Stacey Rubain, SUPERIOR COURT JUDGE 21-A NC

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

2000.00

2000.00