



Amalgamated Transit Union

5025 Wisconsin Ave., N.W., Washington, D.C. 20016-4139
202-537-1645 Fax 202-244-7824

Office of the International Secretary-Treasurer

March 15, 2000

RECEIVED
ELECTION
COMMISSION MAIL ROOM
2000 MAR 15 A 8:56

Public Records Office
Federal Election Commission
999 F Street, NW
Washington, DC 20463

Dear Sir or Madam:

Enclosed please find a copy of the March Report covering the period of February 1, 2000 through February 29, 2000 for Amalgamated Transit Union-COPE.

Trusting this meets with your satisfaction, I am

Sincerely,

Oliver W. Green
International Secretary-
Treasurer/COPE Director

/te
Enclosure

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(SUMMARY PAGE)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 MAR 15 A 8:56

1. NAME OF COMMITTEE (in full)
AMALGAMATED TRANSIT UNION - COPE

ADDRESS (number and street) Check if different than previously reported
5025 WISCONSIN AVENUE, NW

CITY, STATE and ZIP CODE
WASHINGTON, D.C. 20016

2. FEC IDENTIFICATION NUMBER
C00032995

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

4. TYPE OF REPORT

Monthly Report Due On:

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

- February 20
 - March 20
 - April 20
 - May 20
 - June 20
 - July 20
 - August 20
 - September 20
 - October 20
 - November 20
 - December 20
 - January 31
- Twelfth day report preceding _____ (Type of Election)
election on _____ in the state of _____
- Thirtieth day report following the General Election on _____
in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COVERING PERIOD	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	02/01/00 through 02/29/00		
6. (a) Cash on Hand January 1, 2000	00		\$ 197,639.98
(b) Cash on Hand at Beginning of Reporting Period		\$ 197,639.98	
(c) Total Receipts (from Line 19)		\$ 38,028.60	\$ 38,028.60
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 233,668.58	\$ 233,668.58
7. Total Disbursements (from Line 5b)		\$ 13,850.00	\$ 13,850.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 219,818.58	\$ 219,818.58
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ NONE	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ NONE	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.		For further information contact: Federal Election Commission 990 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420	
Type or Print Name of Treasurer OLIVER W. GREEN		Date	
Signature of Treasurer <i>Oliver W. Green</i>		03/15/00	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this report to the penalties of 2 USC § 437g.

§ 437g

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

PAGE 2, FEC FORM 3X

NAME OF COMMITTEE Amalgamated Transit Union - COPE	REPORT COVERING PERIOD	
	02/01/00	02/28/00
	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	610.00	1,360.00
ii. Unitemized	34,487.31	58,518.90
iii. Total (add i and ii) >	35,097.31	57,878.90
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) >	35,097.31	57,878.90
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)	991.29	1,800.00
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	36,028.60	59,759.28
20. Total Federal Receipts (subtract line 18 from line 19) >	36,028.60	59,759.28
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures		
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	0.00
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	13,000.00	31,500.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441b(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00
29. Other Disbursements	850.00	1,150.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d and 29) >	13,850.00	32,650.00
31. Total Federal Disbursements (subtract line 21 d from line 30) >	13,850.00	32,650.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	35,097.31	67,878.90
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from 32)	35,097.31	67,878.90
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	0.00
36. Offsets to Operating Expenditures (from line 15)	-	-
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	0.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER
11 a (i)

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. Full Name, Mailing Address and ZIP Code Barry S. Samet 8819 Densmore North Seattle, WA 98103-4046 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer Municipality of Metro Seattle Occupation Transit Worker Aggregate Year-to Date \$350.00	Day (month, day, year) 02/17/00	Amount of Each Disbursement This Period 350.00
B. Full Name, Mailing Address and ZIP Code Edward F. Rodgers, Jr. 100 Lake Shore Drive Warwick, RI 02889-1661 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer Rhode Island Public Trans Authority Occupation Transit Worker Aggregate Year-to Date \$260.00	Day (month, day, year) 02/05/00	Amount of Each Disbursement This Period 260.00
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to Date > \$	Day (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to Date > \$	Day (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to Date > \$	Day (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to Date > \$	Day (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to Date > \$	Day (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Receipts This Page (optional)		
TOTAL This Period (last page this line number only)		610.00

FOOTNOTES:

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 23

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. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
Ron Klink P.O. Box 15491 Pittsburgh, PA 15237	Ron Klink Candidate, (PA) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/02/00	1,000.00
Marsha Folsom P.O. Box 215 Gullman, AL 35056	Marsha Folsom Candidate, 4th (AL) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/02/00	2,000.00
Martin Sabo P.O. Box 14791 Minneapolis, MN 55414	Martin Sabo Candidate, 6th (MN) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/03/00	1,000.00
Mike Honda P.O. Box 41474 San Jose, CA 95160	Mike Honda Candidate, 15th (CA) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/07/00	3,000.00
Joe Baca 707 West 2nd Street, #G San Bernardino, CA 92410	Joe Baca Candidate, 42nd (CA) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/28/00	1,000.00
Regina Montoya Coppins 6335 Prospect Avenue Dallas, TX 75214	Regina Montoya Coppins Candidate, 5th (TX) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/28/00	1,000.00
Frank Pallone P.O. Box 3176 Long Beach, NJ 07740	Frank Pallone Candidate, 10th (NJ) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/28/00	1,000.00
Dennis Kucinich 11550 Loraine Avenue Cleveland, OH 44111	Dennis Kucinich Candidate, 10th (OH) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/28/00	1,000.00
John Oliver 38 Ivy Street, SE Washington, DC 20003	John Oliver Candidate, 1st (MA) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/29/00	500.00

SUBTOTAL of Disbursements This Page (optional)..... 11,500.00

TOTAL This Period (last page the line number only).....

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	2	2
FOLIO LINE NUMBER		23

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NAME OF COMMITTEE (In Full)

AMALGAMATED TRANSIT UNION - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
Ted House P.O. Box 457 St. Charles, MO 63302	Ted House Candidate, 2nd (MO) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/29/00	1,000.00
Patrick J. Kennedy P.O. Box 321 Pawtucket, RI 02862	Patrick J. Kennedy Candidate, 1st (RI) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/29/00	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Day (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Day (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Day (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Day (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Day (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Day (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Day (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)..... 1,500.00

TOTAL This Period (last page this line number only)..... 13,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

AMAL GAMATED TRANSIT UNION - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
Mike Veon P.O. Box 327 Beaver Falls, PA 15010	Mike Veon, PA Candidate, 14th Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/16/00	150.00
Joseph Preston 732 Dunmore Street Pittsburgh, PA 15206	Joseph Preston, PA Candidate, 24th Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/17/00	200.00
Mike Finnerty 777 Robin Drive Pittsburgh, PA 15220	Mike Finnerty, PA Candidate, 42nd (PA) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/25/00	250.00
Bob O'Connor 5670 Phillips Avenue Pittsburgh, PA 15217	Bob O'Connor Candidate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	02/17/00	250.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)..... 850.00

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

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 3/15/00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>SK</i> PREPARER	3/15/00 DATE PREPARED