

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

Office Use Only

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

12FE4M5

AMALGAMATED TRANSIT UNION - COPE

ADDRESS (number and street) ▼

5025 Wisconsin Ave NW

☐ Check if different than previously reported. (ACC)

Washington

DC

20016

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00032995

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(c) 12-Day

PRE-Election

Report for the:

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

Election on

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

in the  
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
09 01 2012

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2012

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 Lawrence J. Hanley

Signature of Treasurer

Lawrence J. Hanley

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 19 2012

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

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

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AMALGAMATED TRANSIT UNION - COPE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
09 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

|                                                                                                                                                                               | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span><br><span style="border: 1px solid black; padding: 2px;">2012</span> |                         | 294631.92                         |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                                                                                     | 466428.07               |                                   |
| (c) Total Receipts (from Line 19) .....                                                                                                                                       | 67690.25                | 663062.50                         |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....                                                                           | 534118.32               | 957694.42                         |
| 7. Total Disbursements (from Line 31) .....                                                                                                                                   | 312031.75               | 735607.85                         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                                                                                     | 222086.57               | 222086.57                         |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....                                                               | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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)

Page 3

Write or Type Committee Name

**AMALGAMATED TRANSIT UNION - COPE**

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 1 |   | 2 | 0 | 1 | 2 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 1 | 2 |

| I. Receipts                                                                                           | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|-------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:                                                            |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees                                               |                               |                                   |
| (i) Itemized (use Schedule A).....                                                                    | 7139.08                       | 36463.57                          |
| (ii) Unitemized .....                                                                                 | 59032.85                      | 618935.13                         |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►                                                      | 66171.93                      | 655398.70                         |
| (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) .....  | 66171.93                      | 655398.70                         |
| 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.....           | 1500.00                       | 7500.00                           |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....                                           | 18.32                         | 163.80                            |
| 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)) .....                         | 67690.25                      | 663062.50                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                   | 67690.25                      | 663062.50                         |

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>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                         | 375.60                            |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 46.95                         | 375.60                            |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 289500.00                     | 647850.00                         |
| 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 .....                                  | 334.80                        | 334.80                            |
| (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)).....                            | 334.80                        | 334.80                            |
| 29. Other Disbursements .....                                                                  | 22150.00                      | 87047.45                          |
| 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)) ..      | 312031.75                     | 735607.85                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 312031.75                     | 735607.85                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures                                          | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|----------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 66171.93                      | 655398.70                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 334.80                        | 334.80                            |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 65837.13                      | 655063.90                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 46.95                         | 375.60                            |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 46.95                         | 375.60                            |

# **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 147

(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)

AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. WILLIAM A BLAIR

Mailing Address 25 FRONTIER RD

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| WARWICK | RI    | 02889    |

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 ▼

215.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 01    |   | 2012        |

Transaction ID : 4290455

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

B. KEVIN M COLE

Mailing Address 51 NORTH STREET

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| CRANSTON | RI    | 02920    |

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 ▼

267.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 01    |   | 2012        |

Transaction ID : 4290465

Amount of Each Receipt this Period

7.00

Full Name (Last, First, Middle Initial)

C. DENNIS CONNOLLY

Mailing Address 69 WHITEROCK ROAD  
P O BOX 66

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| WESTERLY | RI    | 02891    |

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 ▼

291.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 01    |   | 2012        |

Transaction ID : 4290466

Amount of Each Receipt this Period

9.00

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

21.00

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 147  
(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. JOHN A CRUZ**

Mailing Address 118 THIRD BEACH ROAD

City State Zip Code  
MIDDLETOWN RI 02842-5762

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 01 2012

Transaction ID : 4290469

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. KENNETH M D'AMBROSIO**

Mailing Address 43 BAGLEY AVE

City State Zip Code  
CRANSTON RI 02920

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 01 2012

Transaction ID : 4290471

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. ROBERT E DAVIS JR**

Mailing Address 82 VILLAGE DRIVE

City State Zip Code  
EAST PROVIDENCE RI 02915

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 01 2012

Transaction ID : 4290474

Amount of Each Receipt this Period

7.50

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

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

27.50

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 147  
(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. DAVID C FREMMING**

Mailing Address 34 WILDWOOD AVENUE

City State Zip Code  
PROVIDENCE RI 02907

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 ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 01 2012

Transaction ID : 4290489

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER LEMIRE**

Mailing Address 110 KICKEMUIT ROAD

City State Zip Code  
WARREN RI 02885

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 01 2012

Transaction ID : 4290507

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

**C. ROGER LIMA JR**

Mailing Address 4 JACKSON ST

City State Zip Code  
NORTH PROVIDENCE RI 02904-4223

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 01 2012

Transaction ID : 4290509

Amount of Each Receipt this Period

10.00

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

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

26.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 147

(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. ANTHONY MACHADO**

Mailing Address 85 MAPLE STREET

City  
COVENTRY

State Zip Code  
RI 02816-5404

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 ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2012

Transaction ID : 4290510

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. RAYMOND MATTHIEW**

Mailing Address 62 TOBIE AVENUE

City  
PAWTUCKET

State Zip Code  
RI 02861-2912

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2012

Transaction ID : 4290517

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

**C. THOMAS MILLS**

Mailing Address 96 VEAZIE STREET

City  
PROVIDENCE

State Zip Code  
RI 02908

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 ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2012

Transaction ID : 4290524

Amount of Each Receipt this Period

9.00

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

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

25.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 147  
(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. LYDIA E PERDOMO**

Mailing Address 219 SACKETT STREET

City State Zip Code  
PROVIDENCE RI 02907

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 ▼

267.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 01 2012

Transaction ID : 4290539

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. ERIC ST PIERRE**

Mailing Address 46 HIGH STREET

City State Zip Code  
WARWICK RI 02886

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 ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 01 2012

Transaction ID : 4290558

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. RUTH SULLIVAN**

Mailing Address 68 NARRAGANSETT AVENUE

City State Zip Code  
TIVERTON RI 02878-4620

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 ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 01 2012

Transaction ID : 4290559

Amount of Each Receipt this Period

11.00

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

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

36.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 147

☒ 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. OWEN C SWEETLAND**

Mailing Address 139 ROUNDS AVENUE

City

RIVERSIDE

State

RI

Zip Code

02915-1737

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2012

Transaction ID : 4290560

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. WARREN M CHAPMAN**

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

WASH METRO AREA TRANSIT AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2012

Transaction ID : 4290925

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. ANDREA WALDEN**

Mailing Address 709 COLTON LANE

City

EVERSON

State

WA

Zip Code

98247-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WHATCOM TRANS AUTHORITY

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 04 / 2012

Transaction ID : 4293913

Amount of Each Receipt this Period

15.00

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

35.00

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

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

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

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NAME OF COMMITTEE (In Full)

AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. DEL L WALKER

Mailing Address PO BOX 30572

City

BELLINGHAM

State

WA

Zip Code

98228-2572

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WHATCOM TRANS AUTHORITY

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

192.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 04 / 2012

Transaction ID : 4293914

Amount of Each Receipt this Period

12.00

Full Name (Last, First, Middle Initial)

B. ANDREA WALDEN

Mailing Address 709 COLTON LANE

City

EVERSON

State

WA

Zip Code

98247-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WHATCOM TRANS AUTHORITY

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 04 / 2012

Transaction ID : 4293938

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. DEL L WALKER

Mailing Address PO BOX 30572

City

BELLINGHAM

State

WA

Zip Code

98228-2572

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WHATCOM TRANS AUTHORITY

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 04 / 2012

Transaction ID : 4293939

Amount of Each Receipt this Period

12.00

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

39.00

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

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. STEPHEN KNESTAUT**

Mailing Address 3 INDIAN ROAD

City State Zip Code  
WEST DEPTFORD NJ 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 ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 04 / 2012

Transaction ID : 4293943

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. JOHN G CAMPANELLA**

Mailing Address 213 DOWNING ROAD

City State Zip Code  
SOMERDALE NJ 08083-2615

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 04 / 2012

Transaction ID : 4293944

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. THOMAS A DEIBLER**

Mailing Address 871 BILLOW DR

City State Zip Code  
SAN DIEGO CA 92114-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SAN DIEGO TRANSIT CORP

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 04 / 2012

Transaction ID : 4293991

Amount of Each Receipt this Period

22.00

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

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

122.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. MAURICE W RING**

Mailing Address 231 H STREET

#D

City

CHULA VISTA

State

CA

Zip Code

91910-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAN DIEGO TRANSIT CORP

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 04 / 2012

Transaction ID : 4294080

Amount of Each Receipt this Period

12.00

Full Name (Last, First, Middle Initial)

## **B. RONALD L COX**

Mailing Address 8514 S SHYROCK RD

City

GLASFORD

State

IL

Zip Code

61533-9458

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GREATER PEORIA MASS TRAN DIST

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 12 / 2012

Transaction ID : 4299855

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **C. VERNON D WINN**

Mailing Address 2701 Whitney Pl.

City

Forestville

State

MD

Zip Code

20747-3457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 13 / 2012

Transaction ID : 4305785

Amount of Each Receipt this Period

120.00

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

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

142.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 15 OF 147  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. LORETTA SPRINGER**

Mailing Address 1600 DECKER AVENUE

City State Zip Code  
 SAN MARTIN CA 95046-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SANTA CLARA VLY TRANS. AUTH.

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.21

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 10 2012

Transaction ID : 4308051

Amount of Each Receipt this Period

49.03

Full Name (Last, First, Middle Initial)

## **B. DIANA HERMONE**

Mailing Address 1539 B DAY AVENUE

City State Zip Code  
 SAN MATEO CA 94403-1608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SANTA CLARA VLY TRANS. AUTH.

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 10 2012

Transaction ID : 4308055

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

## **C. KEVIN C ANDRES**

Mailing Address 16927 DEL MONTE AVENUE  
 APT 259

City State Zip Code  
 MORGAN HILL CA 95037-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SANTA CLARA VLY TRANS. AUTH.

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  
 09 10 2012

Transaction ID : 4308070

Amount of Each Receipt this Period

25.00

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

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

154.03

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

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

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. STEVEN M BARRIOS**

Mailing Address 2508 CHERYL LANE

City State Zip Code  
 MODESTO CA 95350-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SANTA CLARA VLY TRANS. AUTH.

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

09 / 10 / 2012

Transaction ID : 4308079

Amount of Each Receipt this Period

27.00

Full Name (Last, First, Middle Initial)

**B. CHARLES BROWN**

Mailing Address 861 N 16TH STREET

City State Zip Code  
 SAN JOSE CA 95112-1546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SANTA CLARA VLY TRANS. AUTH.

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

09 / 10 / 2012

Transaction ID : 4308086

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. STANLEY DRAKE**

Mailing Address 530 PACHECO AVENUE

City State Zip Code  
 SANTA CRUZ CA 95062-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SANTA CLARA VLY TRANS. AUTH.

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 10 / 2012

Transaction ID : 4308109

Amount of Each Receipt this Period

25.00

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

87.00

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. NINOUS EDWARDS**

Mailing Address 1008 N ABBOTT AVENUE

City State Zip Code  
MILPITAS CA 95035-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SANTA CLARA VLY TRANS. AUTH.

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

09 / 10 / 2012

Transaction ID : 4308112

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

## **B. KEVIN T GOLDEN**

Mailing Address 400 ORTEGA AVENUE  
#118

City State Zip Code  
MOUNTAIN VIEW CA 94040-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SANTA CLARA VLY TRANS. AUTH.

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

09 / 10 / 2012

Transaction ID : 4308129

Amount of Each Receipt this Period

27.00

Full Name (Last, First, Middle Initial)

## **C. GARY J GOLLNICK**

Mailing Address 309 KRISMER STREET

City State Zip Code  
MILPITAS CA 95035-4820

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SANTA CLARA VLY TRANS. AUTH.

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 10 / 2012

Transaction ID : 4308131

Amount of Each Receipt this Period

25.00

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

87.00

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. KHRYSHTAL HAMMELL**

Mailing Address 983 FORSELLES WAY  
APT 1

City State Zip Code  
GILROY CA 95020-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SANTA CLARA VLY TRANS. AUTH.

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308137

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

## **B. JOHN E KAMBISH**

Mailing Address 327 CORVILLE DRIVE

City State Zip Code  
SAN JOSE CA 95123-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SANTA CLARA VLY TRANS. AUTH.

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308158

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **C. TOM A LOPROTO**

Mailing Address 458 MC CAMISH AVENUE

City State Zip Code  
SAN JOSE CA 95123-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SANTA CLARA VLY TRANS. AUTH.

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308173

Amount of Each Receipt this Period

35.00

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

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

110.00

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

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

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(check only one)

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☐ 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. JESS A MARTINEZ**

Mailing Address 3801 SAINT NICHOLAS DRIVE

City State Zip Code  
 MODESTO CA 95356-2446

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SANTA CLARA VLY TRANS. AUTH.

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 10 2012

**Transaction ID : 4308176**

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**B. RICHARD MERK**

Mailing Address 1174 DENVER DRIVE

City State Zip Code  
 CAMPBELL CA 95008-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SANTA CLARA VLY TRANS. AUTH.

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 10 2012

**Transaction ID : 4308188**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. MICHAEL O'TOOLE**

Mailing Address 1669 MERRILL DRIVE  
 #D

City State Zip Code  
 SAN JOSE CA 95124-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SANTA CLARA VLY TRANS. AUTH.

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 10 2012

**Transaction ID : 4308207**

Amount of Each Receipt this Period

50.00

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

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

115.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. LISA PRIETO**

Mailing Address 5300 TERNER WAY  
#5105

City State Zip Code  
SAN JOSE CA 95136-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SANTA CLARA VLY TRANS. AUTH.

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308214

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

## **B. FRANCIS P SMITH**

Mailing Address 1425 TOURNEY DRIVE

City State Zip Code  
SAN JOSE CA 95131-2629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SANTA CLARA VLY TRANS. AUTH.

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  
09 / 10 / 2012

Transaction ID : 4308244

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. NORMAN SPAULDING**

Mailing Address 124 BOSTON AVENUE  
#3

City State Zip Code  
SAN JOSE CA 95128-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SANTA CLARA VLY TRANS. AUTH.

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  
09 / 10 / 2012

Transaction ID : 4308246

Amount of Each Receipt this Period

25.00

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

80.00

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

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

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Detailed Summary Page

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(check only one)

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

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. DAN J STOFLE**

Mailing Address 181 ADDISON AVE

City

PALO ALTO

State

CA

Zip Code

94301-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SANTA CLARA VLY TRANS. AUTH.

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

09 / 10 / 2012

Transaction ID : 4308248

Amount of Each Receipt this Period

27.00

Full Name (Last, First, Middle Initial)

## **B. DALE WARD**

Mailing Address 5487 DRYSDALE DRIVE

City

SAN JOSE

State

CA

Zip Code

95124-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SANTA CLARA VLY TRANS. AUTH.

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

09 / 10 / 2012

Transaction ID : 4308267

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

## **C. WILLIAM A BLAIR**

Mailing Address 25 FRONTIER RD

City

WARWICK

State

RI

Zip Code

02889

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

09 / 10 / 2012

Transaction ID : 4308611

Amount of Each Receipt this Period

5.00

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

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

67.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☐ 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. KEVIN M COLE**

Mailing Address 51 NORTH STREET

City  
CRANSTON

State Zip Code  
RI 02920

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 ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308623

Amount of Each Receipt this Period

7.00

Full Name (Last, First, Middle Initial)

**B. DENNIS CONNOLLY**

Mailing Address 69 WHITEROCK ROAD  
P O BOX 66

City  
WESTERLY

State Zip Code  
RI 02891

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308624

Amount of Each Receipt this Period

9.00

Full Name (Last, First, Middle Initial)

**C. JOHN A CRUZ**

Mailing Address 118 THIRD BEACH ROAD

City  
MIDDLETOWN

State Zip Code  
RI 02842-5762

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 ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308627

Amount of Each Receipt this Period

10.00

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

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

26.00

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. KENNETH M D'AMBROSIO**

Mailing Address 43 BAGLEY AVE

City

CRANSTON

State

RI

Zip Code

02920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308629

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. ROBERT E DAVIS JR**

Mailing Address 82 VILLAGE DRIVE

City

EAST PROVIDENCE

State

RI

Zip Code

02915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

242.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308632

Amount of Each Receipt this Period

7.50

Full Name (Last, First, Middle Initial)

**C. ADRIAN DELGADO JR**

Mailing Address 182 GROSVENOR AVENUE

City

EAST PROVIDENCE

State

RI

Zip Code

02914

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308636

Amount of Each Receipt this Period

9.00

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

26.50

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ROBERT J DUGAS**

Mailing Address 100 B NIPMUC TRAIL

City State Zip Code  
NORTH PROVIDENCE RI 02904

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 ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 10 2012

Transaction ID : 4308641

Amount of Each Receipt this Period

12.00

Full Name (Last, First, Middle Initial)

**B. DAVID C FREMMING**

Mailing Address 34 WILDWOOD AVENUE

City State Zip Code  
PROVIDENCE RI 02907

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 ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 10 2012

Transaction ID : 4308648

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. LORI A KEILMAN**

Mailing Address 71 BIRCHWOOD LANE

City State Zip Code  
WEST WARWICK RI 02893

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 10 2012

Transaction ID : 4308660

Amount of Each Receipt this Period

35.00

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

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

67.00

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

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

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. CHRISTOPHER LEMIRE**

Mailing Address 110 KICKEMUIT ROAD

City State Zip Code  
WARREN RI 02885

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 ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 10 2012

Transaction ID : 4308663

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

## **B. DAVID LEMIRE**

Mailing Address 110 KICKEMUIT ROAD

City State Zip Code  
WARREN RI 02885

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 10 2012

Transaction ID : 4308664

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **C. ROGER LIMA JR**

Mailing Address 4 JACKSON ST

City State Zip Code  
NORTH PROVIDENCE RI 02904-4223

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 ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 10 2012

Transaction ID : 4308665

Amount of Each Receipt this Period

10.00

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

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

26.00

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ANTHONY MACHADO**

Mailing Address 85 MAPLE STREET

City

COVENTRY

State

RI

Zip Code

02816-5404

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308666

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. DESIREE L MATHIEU**

Mailing Address 233 WATERMAN AVENUE

City

E PROVIDENCE

State

RI

Zip Code

02914

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 ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308670

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

**C. RAYMOND MATTHIEW**

Mailing Address 62 TOBIE AVENUE

City

PAWTUCKET

State

RI

Zip Code

02861-2912

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 ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308671

Amount of Each Receipt this Period

6.00

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

22.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. LYDIA E PERDOMO**

Mailing Address 219 SACKETT STREET

City

PROVIDENCE

State

RI

Zip Code

02907

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

272.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308689

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

## **B. ROBERT SHERBLUM**

Mailing Address 15 MAGUIRE ROAD

City

NORTH PROVIDENCE

State

RI

Zip Code

02904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308698

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **C. ERIC ST PIERRE**

Mailing Address 46 HIGH STREET

City

WARWICK

State

RI

Zip Code

02886

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 10 / 2012

Transaction ID : 4308706

Amount of Each Receipt this Period

20.00

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

35.00

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. RUTH SULLIVAN**

Mailing Address 68 NARRAGANSETT AVENUE

City

TIVERTON

State

RI

Zip Code

02878-4620

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 ▼

396.00

Date of Receipt

09 / 10 / 2012

Transaction ID : 4308707

Amount of Each Receipt this Period

11.00

Full Name (Last, First, Middle Initial)

**B. GARCELL BULLOCK**

Mailing Address 838 CORIANDER DRIVE  
APT V

City

TORRANCE

State

CA

Zip Code

90502-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOS ANGELES CTY METRO TRAN AUT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

09 / 10 / 2012

Transaction ID : 4308888

Amount of Each Receipt this Period

12.50

Full Name (Last, First, Middle Initial)

**C. CARLOS CURIEL JR**

Mailing Address 12821 N RIM WAY

City

RANCHO CUCAMONGA

State

CA

Zip Code

91739-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOS ANGELES CTY METRO TRAN AUT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

09 / 10 / 2012

Transaction ID : 4308954

Amount of Each Receipt this Period

20.00

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

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

43.50

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

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. HAGOP H HAGOPIAN**

Mailing Address 527 E CHEVY CHASE DRIVE  
#1

City State Zip Code  
GLENDALE CA 91205-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LOS ANGELES CTY METRO TRAN AUT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 10 2012

Transaction ID : 4309099

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

## **B. PAUL KAPLAN**

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  
PALM TRAN INC

Occupation  
Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 10 2012

Transaction ID : 4309997

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **C. 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  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 18 2012

Transaction ID : 4311246

Amount of Each Receipt this Period

25.00

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

85.84

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. 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  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311247

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. JUDY J YOUNG**

Mailing Address 7603 SOUTH 112TH STREET

City State Zip Code  
SEATTLE WA 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 ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311250

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. NEAL I SAFRIN**

Mailing Address 5451 NE 203RD PLACE

City State Zip Code  
LAKE FOREST PARK WA 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 ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311251

Amount of Each Receipt this Period

25.00

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

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

75.00

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

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for each category of the  
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. NASIF M ABD-AL-SHAHEED**

Mailing Address P O BOX 2032

City  
SEATTLE

State  
WA

Zip Code  
98111-2032

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 ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311258

Amount of Each Receipt this Period

12.50

Full Name (Last, First, Middle Initial)

**B. ALIM ABDULLAH**

Mailing Address 2222 SW BARTON STREET  
UNIT 41

City  
SEATTLE

State  
WA

Zip Code  
98106-0000

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 ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311260

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. CHRIS T ABE**

Mailing Address 500 QUINCY AVENUE NE

City  
RENTON

State  
WA

Zip Code  
98059-4555

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 ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311261

Amount of Each Receipt this Period

2.50

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

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

40.00

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

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

FOR LINE NUMBER: PAGE 32 OF 147  
(check only one)

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

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. VELDA D ALEXANDER**

Mailing Address 2401 E LYNN STREET  
APT 2

City State Zip Code  
SEATTLE WA 98122-0000

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 ▼

202.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311267

Amount of Each Receipt this Period

12.50

Full Name (Last, First, Middle Initial)

**B. ROBERT E BANGS**

Mailing Address 2411 SOUTH 248TH STREET  
#D-12

City State Zip Code  
KENT WA 98032-4070

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 ▼

376.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311297

Amount of Each Receipt this Period

0.50

Full Name (Last, First, Middle Initial)

**C. KEVIN P BARTLEIN**

Mailing Address 1729 WHITMAN AVENUE NE

City State Zip Code  
RENTON WA 98059-0000

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 ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311304

Amount of Each Receipt this Period

1.00

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

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

14.00

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

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

FOR LINE NUMBER: PAGE 33 OF 147  
(check only one)

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

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. MOHAMMAD-HAS BAZARGAN**

Mailing Address 521 S WELLER APT 258

City  
SEATTLE

State  
WA

Zip Code  
98104-0000

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311307

Amount of Each Receipt this Period

7.50

Full Name (Last, First, Middle Initial)

**B. MARK H BELL**

Mailing Address 14547 NE 40TH STREET  
#J201

City

BELLEVUE

State

WA

Zip Code

98007-3383

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311311

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. MELODY A BRUTSCHER**

Mailing Address 3625 BEACH DRIVE SW  
#9

City

SEATTLE

State

WA

Zip Code

98116-0000

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 ▼

302.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311356

Amount of Each Receipt this Period

1.00

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

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

13.50

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

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

FOR LINE NUMBER: PAGE 34 OF 147

(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. MICHAEL BURR**

Mailing Address 11 I STREET SE

City

AUBURN

State

WA

Zip Code

98002-5657

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311361

Amount of Each Receipt this Period

2.50

Full Name (Last, First, Middle Initial)

**B. ERIC K BUTLER**

Mailing Address 8860 122ND COURT SE

City

NEW CASTLE

State

WA

Zip Code

98056-0000

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 ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311364

Amount of Each Receipt this Period

0.50

Full Name (Last, First, Middle Initial)

**C. TAYLORE T CALDWELL**

Mailing Address 2416 54TH PLACE SW  
APT 1

City

SEATTLE

State

WA

Zip Code

98116-1847

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 ▼

231.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311368

Amount of Each Receipt this Period

22.00

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

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

25.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. RAY H CAMPBELL**

Mailing Address 28648 226TH AVENUE SE

City

MAPLE VALLEY

State

WA

Zip Code

98038-0000

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 ▼

334.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311369

Amount of Each Receipt this Period

2.50

Full Name (Last, First, Middle Initial)

**B. WILLIAM G CLIFFORD**

Mailing Address 161 22ND AVENUE

City

SEATTLE

State

WA

Zip Code

98122-6035

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 ▼

209.36

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311397

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. WILLIAM M COCKERHAM**

Mailing Address PO BOX 417

City

KINGSTON

State

WA

Zip Code

98346-0417

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 ▼

205.50

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311399

Amount of Each Receipt this Period

9.00

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

16.50

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. EDWARD J CRAIG**

Mailing Address 1420 NW GILMAN BLVD  
#2285

City State Zip Code  
ISSAQUAN WA 98027-0000

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 ▼

204.56

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311414

Amount of Each Receipt this Period

1.00

Full Name (Last, First, Middle Initial)

**B. CALVIN E CUMMINGS**

Mailing Address 1407-50TH STREET NE

City State Zip Code  
AUBURN WA 98002-0000

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 ▼

300.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311421

Amount of Each Receipt this Period

0.25

Full Name (Last, First, Middle Initial)

**C. PRENOYAL C DAVIS**

Mailing Address 19004 SILVER CREEK AVE E

City State Zip Code  
PUYALLUP WA 98375-0000

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 ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311437

Amount of Each Receipt this Period

2.50

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

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

3.75

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. TRACEY R DAVIS**

Mailing Address 4205 AUBURN WAY S  
 LOT 116

City State Zip Code  
 AUBURN WA 98092-7252

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 ▼

351.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 18 2012

Transaction ID : 4311439

Amount of Each Receipt this Period

0.50

Full Name (Last, First, Middle Initial)

## **B. MARK J DE BORD**

Mailing Address 12510 VALLEY AVENUE E

City State Zip Code  
 PUYALLUP WA 98372-0000

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 18 2012

Transaction ID : 4311447

Amount of Each Receipt this Period

12.50

Full Name (Last, First, Middle Initial)

## **C. WARREN C DOLAN II**

Mailing Address 1220 NE 97TH STREET

City State Zip Code  
 SEATTLE WA 98115-2228

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 18 2012

Transaction ID : 4311460

Amount of Each Receipt this Period

15.00

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

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

28.00

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL C DONOW**

Mailing Address 328 NO MADISON STREET

City

MONROE

State

WA

Zip Code

98272-1820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311461

Amount of Each Receipt this Period

12.50

Full Name (Last, First, Middle Initial)

**B. JOHN E EATON**

Mailing Address 4634 365TH AVENUE SE

City

FALL CITY

State

WA

Zip Code

98024-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

395.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311480

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. TROY S EDWARDS**

Mailing Address 510 STEVENS AVENUE SW  
APT S407

City

RENTON

State

WA

Zip Code

98057-5884

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311485

Amount of Each Receipt this Period

1.00

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

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

23.50

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

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

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

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. DAVID S FAIRBANKS**

Mailing Address 8622 202ND SW

City State Zip Code  
EDMONDS WA 98026-6644

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 ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : 4311498**

Amount of Each Receipt this Period

2.50

Full Name (Last, First, Middle Initial)

**B. GALUAFA FETUI**

Mailing Address 2652 SW 335TH PLACE

City State Zip Code  
FEDERAL WAY WA 98023-0000

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 ▼

272.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : 4311502**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. JACOB S FRYAR**

Mailing Address 2346 NE 94TH STREET

City State Zip Code  
SEATTLE WA 98115-0000

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 ▼

207.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : 4311520**

Amount of Each Receipt this Period

10.00

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

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

17.50

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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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**

Full Name (Last, First, Middle Initial)

**A. VALARIE K GALLEGOS**

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311527

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. MARYLIN P GARY**

Mailing Address 2405 S STAR LAKE ROAD  
APT 65-303

City  
FEDERAL WAY

State  
WA

Zip Code  
98003-0000

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 ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311529

Amount of Each Receipt this Period

1.00

Full Name (Last, First, Middle Initial)

**C. RANDALL K GIBSON**

Mailing Address 7525 AURORA AVENUE N

City  
SEATTLE

State  
WA

Zip Code  
98103-0000

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 ▼

222.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311534

Amount of Each Receipt this Period

10.00

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

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

16.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. DIANE GIMENEZ**

Mailing Address 11726 14TH AVENUE SO

City State Zip Code  
 SEATTLE WA 98168-0000

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 ▼

201.40

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311542

Amount of Each Receipt this Period

0.50

Full Name (Last, First, Middle Initial)

## **B. STACY A GOSBY**

Mailing Address 3713 S 257TH STREET

City State Zip Code  
 KENT WA 98032-0000

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 ▼

230.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311554

Amount of Each Receipt this Period

2.50

Full Name (Last, First, Middle Initial)

## **C. KATHERINE F GRAINGER**

Mailing Address 15108 SE 179TH STREET  
 #3N

City State Zip Code  
 RENTON WA 98058-0000

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 ▼

212.50

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311558

Amount of Each Receipt this Period

12.50

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

15.50

**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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. KATHERINE M GRAY**

Mailing Address 1209 DES MOINES MEM DR  
STE D1

City State Zip Code  
BURIEN WA 98168-1701

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 ▼

287.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : 4311561**

Amount of Each Receipt this Period

12.50

Full Name (Last, First, Middle Initial)

**B. ELI HAGGINS**

Mailing Address 4727 317TH LANE  
#D

City State Zip Code  
FEDERAL WAY WA 98023-0000

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 ▼

265.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : 4311578**

Amount of Each Receipt this Period

1.50

Full Name (Last, First, Middle Initial)

**C. LICHELLE D HALE**

Mailing Address 33413 33RD PLACE SW

City State Zip Code  
FEDERAL WAY WA 98023-2753

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : 4311581**

Amount of Each Receipt this Period

15.00

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

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

29.00

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A HALL**

Mailing Address 23621 - 112TH AVENUE SE  
H-204

City State Zip Code  
KENT WA 98031-0000

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 ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 18 2012

**Transaction ID : 4311584**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. JAMES HARPER**

Mailing Address 32801-29TH AVENUE SW

City State Zip Code  
FEDERAL WAY WA 98023-0000

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 ▼

376.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 18 2012

**Transaction ID : 4311588**

Amount of Each Receipt this Period

0.50

Full Name (Last, First, Middle Initial)

**C. AUDREY R HEDSTROM**

Mailing Address 22413 11TH AVENUE SE

City State Zip Code  
KENT WA 98031-0000

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 ▼

375.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 18 2012

**Transaction ID : 4311599**

Amount of Each Receipt this Period

0.25

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

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

15.75

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ALAN R HEPWORTH**

Mailing Address 23325 91ST AVENUE S  
#NN203

City State Zip Code  
KENT WA 98031-2953

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311607

Amount of Each Receipt this Period

12.50

Full Name (Last, First, Middle Initial)

**B. JERRY L JACOBS**

Mailing Address 2112 NO 41ST

City State Zip Code  
SEATTLE WA 98103-8316

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 ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311648

Amount of Each Receipt this Period

2.50

Full Name (Last, First, Middle Initial)

**C. JAMES A JAKEMAN**

Mailing Address 4019 SW 327TH

City State Zip Code  
FEDERAL WAY WA 98023-0000

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311652

Amount of Each Receipt this Period

0.50

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

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

15.50

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JAMES L JOHNSON**

Mailing Address 8425 46TH AVENUE SO

City  
SEATTLE

State  
WA

Zip Code  
98118-0000

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 ▼

380.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311673

Amount of Each Receipt this Period

2.50

Full Name (Last, First, Middle Initial)

**B. ALEXANDER N KEETON**

Mailing Address 27821 32ND PLACE SOUTH

City  
AUBURN

State  
WA

Zip Code  
98001-0000

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 ▼

202.50

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311704

Amount of Each Receipt this Period

7.50

Full Name (Last, First, Middle Initial)

**C. ERNEST J KING**

Mailing Address 11407 SE 180TH PLACE

City  
RENTON

State  
WA

Zip Code  
98055-6530

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 ▼

207.50

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311710

Amount of Each Receipt this Period

10.00

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

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

20.00

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. DALE L KOPPERDAHL**

Mailing Address 11819 SE 171ST LANE  
#R301

City State Zip Code  
RENTON WA 98058-0000

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 ▼

383.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 18 2012

**Transaction ID : 4311719**

Amount of Each Receipt this Period

4.00

Full Name (Last, First, Middle Initial)

**B. SAMUEL LEAANA**

Mailing Address 1217 H STREET SE

City State Zip Code  
AUBURN WA 98002-6729

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 ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 18 2012

**Transaction ID : 4311740**

Amount of Each Receipt this Period

2.50

Full Name (Last, First, Middle Initial)

**C. CAROL A LEAK**

Mailing Address 1992 SW 352ND STREET

City State Zip Code  
FEDERAL WAY WA 98023-3784

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 ▼

316.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 18 2012

**Transaction ID : 4311742**

Amount of Each Receipt this Period

0.50

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

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

7.00

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. RICHARD L LEONARD**

Mailing Address 6114 SO BANGOR STREET

City  
SEATTLE

State  
WA

Zip Code  
98178-2431

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 ▼

285.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311752

Amount of Each Receipt this Period

2.50

Full Name (Last, First, Middle Initial)

**B. MICHAEL J MARTINI**

Mailing Address 2015 S 301ST STREET

City

FEDERAL WAY

State

WA

Zip Code

98003-4237

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 ▼

230.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311805

Amount of Each Receipt this Period

2.50

Full Name (Last, First, Middle Initial)

**C. WESLEY A MAYS**

Mailing Address 3715 S SHERIDAN AVENUE

City

TACOMA

State

WA

Zip Code

98418-3914

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 ▼

376.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4311812

Amount of Each Receipt this Period

0.50

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

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

5.50

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. CHARLES N MILLER**

Mailing Address 738 34TH AVENUE

City  
SEATTLE

State  
WA

Zip Code  
98122-0000

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311848

Amount of Each Receipt this Period

2.50

Full Name (Last, First, Middle Initial)

**B. ROBERT E MOORE**

Mailing Address 14511 SE 252ND PLACE

City  
KENT

State  
WA

Zip Code  
98042-3415

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 ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311875

Amount of Each Receipt this Period

0.50

Full Name (Last, First, Middle Initial)

**C. JOHN C MUNRO**

Mailing Address 5726 145TH PLACE SW

City  
EDMONDS

State  
WA

Zip Code  
98026-3729

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 ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311882

Amount of Each Receipt this Period

1.00

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

4.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JOHN L MURROW**

Mailing Address 10457 DES MOINES WAY S  
#202

City State Zip Code  
SEATTLE WA 98168-5616

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 ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 18 / 2012

**Transaction ID : 4311884**

Amount of Each Receipt this Period

2.50

Full Name (Last, First, Middle Initial)

**B. LATONYA D PLUMMER-GREASON**

Mailing Address 16316 18TH AVE E

City State Zip Code  
TACOMA WA 98445-0000

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  
09 / 18 / 2012

**Transaction ID : 4311959**

Amount of Each Receipt this Period

0.00

Full Name (Last, First, Middle Initial)

**C. JOSEPH F REED**

Mailing Address 11424 1ST AVENUE S  
UNIT 304

City State Zip Code  
SEATTLE WA 98168-0000

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 18 / 2012

**Transaction ID : 4311989**

Amount of Each Receipt this Period

2.50

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

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

5.00

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JAMES E REESE**

Mailing Address 15442-38TH TERRACE S  
#C-101

City State Zip Code  
TUKWILA WA 98188-8038

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 ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4311991

Amount of Each Receipt this Period

1.50

Full Name (Last, First, Middle Initial)

**B. JOSE A ROSADO**

Mailing Address 445 SW 144TH STREET

City State Zip Code  
SEATTLE WA 98166-1545

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 ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312017

Amount of Each Receipt this Period

0.50

Full Name (Last, First, Middle Initial)

**C. NEAL I SAFRIN**

Mailing Address 5451 NE 203RD PLACE

City State Zip Code  
LAKE FOREST PARK WA 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 ▼

287.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312029

Amount of Each Receipt this Period

1.00

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

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

3.00

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

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

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☐ 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. BRIAN L SHERLOCK**

Mailing Address 1557 NE 171ST STREET

City  
SHORELINE

State Zip Code  
WA 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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312057

Amount of Each Receipt this Period

0.50

Full Name (Last, First, Middle Initial)

**B. JAMES C SHIPP**

Mailing Address 19007 91 AVENUE  
COURT E

City  
PUYALLUP

State Zip Code  
WA 98375-6153

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 ▼

387.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312060

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

**C. YVONNE M SHORT**

Mailing Address 11469 69TH PLACE SO

City  
SEATTLE

State Zip Code  
WA 98178-3002

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 ▼

272.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312062

Amount of Each Receipt this Period

5.00

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

11.50

**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  
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(check only one)

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. CARL SMITHBURG**

Mailing Address 13411 SE 57TH

City

BELLEVUE

State

WA

Zip Code

98006-4106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312081

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. DEBORAH L SNIDER**

Mailing Address 9020 MEADOW ROAD SW

City

TACOMA

State

WA

Zip Code

98499-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312082

Amount of Each Receipt this Period

2.50

Full Name (Last, First, Middle Initial)

**C. SCOTT A SPENCER**

Mailing Address 600 N 85TH APT 312

City

SEATTLE

State

WA

Zip Code

98103-3869

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312087

Amount of Each Receipt this Period

13.25

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

30.75

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. WILLIAM J SPIVEY**

Mailing Address 135-26TH AVENUE E

City  
SEATTLE

State  
WA

Zip Code  
98112-0000

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 ▼

223.75

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312088

Amount of Each Receipt this Period

12.50

Full Name (Last, First, Middle Initial)

**B. STANLEY C STRAKER**

Mailing Address 721 ASHLEY COURT E

City  
BUCKLEY

State  
WA

Zip Code  
98321-0000

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 ▼

320.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312102

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. JUSTIN C SWANSON**

Mailing Address 7414A 142ND AVENUE E

City  
SUMNER

State  
WA

Zip Code  
98390-0000

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 ▼

212.50

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312114

Amount of Each Receipt this Period

12.50

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

35.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 54 OF 147  
(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)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. KATRINA M TAPLIN**Mailing Address 18930 - 47TH AVE S  
APT 22

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| SEATAC | WA    | 98188-0000 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSITOccupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 18    | / | 2012        |

Transaction ID : 4312119

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. CECILY K THOMPSON**Mailing Address 607 37TH STREET SE  
#108

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| AUBURN | WA    | 98002-8039 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSITOccupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.60

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 18    | / | 2012        |

Transaction ID : 4312132

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. THERESA L TOBIN**

Mailing Address 19001 96TH AVENUE COURT E

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| PUYALLUP | WA    | 98375-0000 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSITOccupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 18    | / | 2012        |

Transaction ID : 4312134

Amount of Each Receipt this Period

21.00

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

36.00

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

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ROGENE B TOLSON**

Mailing Address 21210 38TH AVENUE EAST

City  
SPANAWAY

State  
WA

Zip Code  
98387-6866

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 ▼

319.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312135

Amount of Each Receipt this Period

12.50

Full Name (Last, First, Middle Initial)

**B. JIMMY O VANN**

Mailing Address 3223 S MONROE STREET

City  
TACOMA

State  
WA

Zip Code  
98409-0000

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 ▼

385.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312147

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. DAVID S WAGGONER**

Mailing Address 360 NW Dogwood St. K204

City  
Issaquah

State  
WA

Zip Code  
98027-2724

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 ▼

215.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312151

Amount of Each Receipt this Period

7.50

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

25.00

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JERRY WALLACE III**

Mailing Address 7706 37TH AVENUE SO

City  
SEATTLE

State  
WA

Zip Code  
98118-4008

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 ▼

400.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312153

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. DONALD L WARD**

Mailing Address 2538 S RAYMOND ST

City  
SEATTLE

State  
WA

Zip Code  
98108-0000

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 ▼

410.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312154

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. CHRIS W WICK**

Mailing Address 14114 SE 192 STREET

City  
RENTON

State  
WA

Zip Code  
98058-0000

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 ▼

237.50

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312167

Amount of Each Receipt this Period

25.00

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

55.00

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

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. KELLY R WICKHAM**

Mailing Address 6706 N VAN DE CAR RD SE

City State Zip Code  
 PORT ORCHARD WA 98367-8506

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 ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : 4312168**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

## **B. EDWARD N WILLIAMS JR**

Mailing Address 11109 NE 124TH LANE  
 #B-307

City State Zip Code  
 KIRKLAND WA 98034-0000

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : 4312169**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **C. DONALD R WILLIAMSON**

Mailing Address 6225 PARK WAY

City State Zip Code  
 LYNNWOOD WA 98036-0000

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : 4312171**

Amount of Each Receipt this Period

20.00

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

45.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. RUTH WILSON**

Mailing Address 13041 15TH NE

City  
SEATTLE

State  
WA

Zip Code  
98125-4023

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312172

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. RICHARD P WOOD**

Mailing Address 8921 1ST STREET NE  
H204

City

LAKE STEVENS

State

WA

Zip Code

98258-8943

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 ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312174

Amount of Each Receipt this Period

12.50

Full Name (Last, First, Middle Initial)

**C. WILLIAM A BLAIR**

Mailing Address 25 FRONTIER RD

City

WARWICK

State

RI

Zip Code

02889

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312363

Amount of Each Receipt this Period

5.00

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

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

22.50

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

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

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

NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. KEVIN M COLE**

Mailing Address 51 NORTH STREET

City  
CRANSTON

State Zip Code  
RI 02920

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 ▼

281.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312376

Amount of Each Receipt this Period

7.00

Full Name (Last, First, Middle Initial)

**B. DENNIS CONNOLLY**

Mailing Address 69 WHITEROCK ROAD  
P O BOX 66

City  
WESTERLY

State Zip Code  
RI 02891

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 ▼

309.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312377

Amount of Each Receipt this Period

9.00

Full Name (Last, First, Middle Initial)

**C. JOHN A CRUZ**

Mailing Address 118 THIRD BEACH ROAD

City  
MIDDLETOWN

State Zip Code  
RI 02842-5762

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312380

Amount of Each Receipt this Period

10.00

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

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

26.00

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

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

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(check only one)

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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**

Full Name (Last, First, Middle Initial)

**A. KENNETH M D'AMBROSIO**

Mailing Address 43 BAGLEY AVE

City

CRANSTON

State

RI

Zip Code

02920

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 ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312382

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. ROBERT E DAVIS JR**

Mailing Address 82 VILLAGE DRIVE

City

EAST PROVIDENCE

State

RI

Zip Code

02915

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312385

Amount of Each Receipt this Period

7.50

Full Name (Last, First, Middle Initial)

**C. ADRIAN DELGADO JR**

Mailing Address 182 GROSVENOR AVENUE

City

EAST PROVIDENCE

State

RI

Zip Code

02914

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 ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312389

Amount of Each Receipt this Period

9.00

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

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

26.50

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ROBERT J DUGAS**

Mailing Address 100 B NIPMUC TRAIL

City State Zip Code  
 NORTH PROVIDENCE RI 02904

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 ▼

219.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312394

Amount of Each Receipt this Period

12.00

Full Name (Last, First, Middle Initial)

**B. DAVID C FREMMING**

Mailing Address 34 WILDWOOD AVENUE

City State Zip Code  
 PROVIDENCE RI 02907

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 ▼

355.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312401

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. LORI A KEILMAN**

Mailing Address 71 BIRCHWOOD LANE

City State Zip Code  
 WEST WARWICK RI 02893

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 ▼

265.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312413

Amount of Each Receipt this Period

35.00

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

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

67.00

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. CHRISTOPHER LEMIRE**

Mailing Address 110 KICKEMUIT ROAD

City State Zip Code  
WARREN RI 02885

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 ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : 4312416**

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

## **B. DAVID LEMIRE**

Mailing Address 110 KICKEMUIT ROAD

City State Zip Code  
WARREN RI 02885

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 / D D / Y Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : 4312417**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **C. ROGER LIMA JR**

Mailing Address 4 JACKSON ST

City State Zip Code  
NORTH PROVIDENCE RI 02904-4223

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 ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : 4312418**

Amount of Each Receipt this Period

10.00

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

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

26.00

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ANTHONY MACHADO**

Mailing Address 85 MAPLE STREET

City  
COVENTRY

State  
RI

Zip Code  
02816-5404

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 ▼

410.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312419

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. DESIREE L MATHIEU**

Mailing Address 233 WATERMAN AVENUE

City  
E PROVIDENCE

State  
RI

Zip Code  
02914

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 ▼

209.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312423

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

**C. RAYMOND MATTHIEW**

Mailing Address 62 TOBIE AVENUE

City  
PAWTUCKET

State  
RI

Zip Code  
02861-2912

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 ▼

222.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4312424

Amount of Each Receipt this Period

6.00

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

22.00

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

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

 Use separate schedule(s)  
 for each category of the  
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|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. LYDIA E PERDOMO

Mailing Address 219 SACKETT STREET

City

PROVIDENCE

State

RI

Zip Code

02907

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 ▼

277.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 |   |   | 1 | 8 |   |   | 2 | 0 | 1 | 2 |   |   |

Transaction ID : 4312442

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

B. FRANCIS F PLUTZNER

Mailing Address 361 DOROC AVENUE

City

CRANSTON

State

RI

Zip Code

02910

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 ▼

205.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 |   |   | 1 | 8 |   |   | 2 | 0 | 1 | 2 |   |   |

Transaction ID : 4312444

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

C. ROBERT SHERBLUM

Mailing Address 15 MAGUIRE ROAD

City

NORTH PROVIDENCE

State

RI

Zip Code

02904

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 ▼

274.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 |   |   | 1 | 8 |   |   | 2 | 0 | 1 | 2 |   |   |

Transaction ID : 4312451

Amount of Each Receipt this Period

10.00

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

21.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

### A. ERIC ST PIERRE

Mailing Address 46 HIGH STREET

City

WARWICK

State

RI

Zip Code

02886

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 ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312459

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

### B. RUTH SULLIVAN

Mailing Address 68 NARRAGANSETT AVENUE

City

TIVERTON

State

RI

Zip Code

02878-4620

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 ▼

407.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312460

Amount of Each Receipt this Period

11.00

Full Name (Last, First, Middle Initial)

### C. ANDREA WALDEN

Mailing Address 709 COLTON LANE

City

EVERSON

State

WA

Zip Code

98247-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WHATCOM TRANS AUTHORITY

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312638

Amount of Each Receipt this Period

15.00

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

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

46.00

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. DEL L WALKER**

Mailing Address PO BOX 30572

City

BELLINGHAM

State

WA

Zip Code

98228-2572

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WHATCOM TRANS AUTHORITY

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312639

Amount of Each Receipt this Period

12.00

Full Name (Last, First, Middle Initial)

## **B. THOMAS A DEIBLER**

Mailing Address 871 BILLOW DR

City

SAN DIEGO

State

CA

Zip Code

92114-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAN DIEGO TRANSIT CORP

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312714

Amount of Each Receipt this Period

22.00

Full Name (Last, First, Middle Initial)

## **C. MAURICE W RING**

Mailing Address 231 H STREET

#D

City

CHULA VISTA

State

CA

Zip Code

91910-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAN DIEGO TRANSIT CORP

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

Transaction ID : 4312803

Amount of Each Receipt this Period

12.00

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

46.00

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. KAREN D STITES**

Mailing Address 2708 CHERRY STREET

City  
HOQUIAM

State  
WA

Zip Code  
98550-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GRAYS HARBOR COMPANY

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4316480

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

## **B. JOSEPH J BAHORICH**

Mailing Address 3013 WOODVIEW DRIVE

City

ALLISON PARK

State

PA

Zip Code

15101

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 ▼

250.08

Date of Receipt

09 / 26 / 2012

Transaction ID : 4322396

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

## **C. WILLIAM H BUSH JR**

Mailing Address 3515 WASHINGTON PIKE

City

BRIDGEVILLE

State

PA

Zip Code

15017

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 ▼

208.40

Date of Receipt

09 / 26 / 2012

Transaction ID : 4322438

Amount of Each Receipt this Period

20.84

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

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

71.68

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. TIMOTHY A CLEARY**

Mailing Address 4002 FAIRFIELD AVENUE

City State Zip Code  
MUNHALL PA 15120-3440

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 ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y  
09 / 26 / 2012

Transaction ID : 4322458

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

**B. RICHARD DABECCO**

Mailing Address 2321 PALM BEACH AVENUE

City State Zip Code  
PITTSBURGH PA 15216-3421

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 ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y  
09 / 26 / 2012

Transaction ID : 4322467

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

**C. CLARENCE L DAVIS**

Mailing Address 2343B PATTERSON AVENUE

City State Zip Code  
PITTSBURGH PA 15218

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 ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y  
09 / 26 / 2012

Transaction ID : 4322469

Amount of Each Receipt this Period

20.84

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

62.52

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. 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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 26 / 2012

Transaction ID : 4322520

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. JEFFREY L JONES**

Mailing Address 110 YOSEMITE DRIVE

City

PITTSBURGH

State

PA

Zip Code

15235-2042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PORT AUTH-ALLEG - PAT TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 26 / 2012

Transaction ID : 4322547

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

**C. THEODORE A KIELUR**

Mailing Address 3453 WEST RUN ROAD

City

PITTSBURGH

State

PA

Zip Code

15120-2866

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PORT AUTH-ALLEG - PAT TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 26 / 2012

Transaction ID : 4322558

Amount of Each Receipt this Period

25.00

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

105.84

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

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

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. RALPH T KLUGH**

Mailing Address 3418 CEDAR GLEN DRIVE

City

ALLISON PARK

State

PA

Zip Code

15101-1073

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : 4322565**

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**B. DANIEL J LUCAS**

Mailing Address 2115 HIGHLAND AVENUE

City

MC KEESPORT

State

PA

Zip Code

15132

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 ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : 4322601**

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

**C. DWAYNE MC KITRICK**

Mailing Address 167 SEAVEY RD

City

PITTSBURGH

State

PA

Zip Code

15223

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 ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : 4322620**

Amount of Each Receipt this Period

20.84

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

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

76.68

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. MATTHEW MERVOSH**

Mailing Address 2919 BREVARD AVENUE

City

PITTSBURGH

State

PA

Zip Code

15227-2541

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 ▼

421.88

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2012

Transaction ID : 4322627

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

**B. JOSEPH V MIELCAREK**

Mailing Address 575 DUTCH RIDGE ROAD

City

ELLWOOD CITY

State

PA

Zip Code

16117

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 ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2012

Transaction ID : 4322630

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

**C. MARY JO NEUMONT**

Mailing Address 376 Anawanda Ave.

City

Pittsburgh

State

PA

Zip Code

15228-2439

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2012

Transaction ID : 4322651

Amount of Each Receipt this Period

37.50

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

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

100.01

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

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

FOR LINE NUMBER: PAGE 72 OF 147  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JAMES E RAMSEY**

Mailing Address 169 EVERGLADE DR

City State Zip Code  
PENN HILLS PA 15235-2011

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 ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : 4322673**

Amount of Each Receipt this Period

208.40

Full Name (Last, First, Middle Initial)

**B. NANCY J REED**

Mailing Address 70 CASTLE SHANNON BLVD

City State Zip Code  
PITTSBURGH PA 15228

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 ▼

492.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : 4322676**

Amount of Each Receipt this Period

49.25

Full Name (Last, First, Middle Initial)

**C. MICHAEL G THURMOND**

Mailing Address 960 DAVIS AVENUE

City State Zip Code  
PITTSBURGH PA 15212-2065

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 ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : 4322737**

Amount of Each Receipt this Period

42.00

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

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

112.09

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

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. RONALD L COX**

Mailing Address 8514 S SHYROCK RD

City

GLASFORD

State

IL

Zip Code

61533-9458

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GREATER PEORIA MASS TRAN DIST

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2012

Transaction ID : 4322793

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. TONIA STARKEY-OBA**

Mailing Address 84 VERSAILLES COURT

City

CINCINNATI

State

OH

Zip Code

45240-3831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SW OHIO REGIONAL TRANSIT AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 06 / 2012

Transaction ID : 4326207

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. LISA A DARLING**

Mailing Address 12037 S LAFAYETTE

City

CHICAGO

State

IL

Zip Code

60628-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHICAGO TRANSIT AUTHORITY RAIL

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Transaction ID : 4326913

Amount of Each Receipt this Period

50.00

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

85.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. SAMUEL HALLMAN**

Mailing Address 838 E 38TH PLACE  
APT 303

City State Zip Code  
CHICAGO IL 60653-1940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHICAGO TRANSIT AUTHORITY RAIL

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 25 / 2012

**Transaction ID : 4326969**

Amount of Each Receipt this Period

63.75

Full Name (Last, First, Middle Initial)

**B. ANTHONY L JONES**

Mailing Address 4860 KINGS COURT

City State Zip Code  
RICHTON PARK IL 60471-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHICAGO TRANSIT AUTHORITY RAIL

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 25 / 2012

**Transaction ID : 4327008**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. RONALD L COX**

Mailing Address 8514 S SHYROCK RD

City State Zip Code  
GLASFORD IL 61533-9458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GREATER PEORIA MASS TRAN DIST

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 27 / 2012

**Transaction ID : 4327579**

Amount of Each Receipt this Period

10.00

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

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

103.75

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. KAREN M FOULKS**

Mailing Address 57121 GUERNSEY AVE

City

OSCEOLA

State

IN

Zip Code

46561-1965

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTH BEND PUBLIC TRANS COPR

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

**Transaction ID : 4327628**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. KAREN M FOULKS**

Mailing Address 57121 GUERNSEY AVE

City

OSCEOLA

State

IN

Zip Code

46561-1965

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTH BEND PUBLIC TRANS COPR

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

**Transaction ID : 4327635**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. KAREN M FOULKS**

Mailing Address 57121 GUERNSEY AVE

City

OSCEOLA

State

IN

Zip Code

46561-1965

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTH BEND PUBLIC TRANS COPR

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

**Transaction ID : 4327640**

Amount of Each Receipt this Period

5.00

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

15.00

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. DENNIS ANTONELLIS**

Mailing Address 5025 Wisconsin Ave NW

City State Zip Code  
 Washington DC 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 ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 07 / 2012

Transaction ID : 4331825

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

## **B. ROBERT H BAKER**

Mailing Address 5025 Wisconsin Ave NW

City State Zip Code  
 Washington DC 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 ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 07 / 2012

Transaction ID : 4331826

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

## **C. PAUL D BOWEN**

Mailing Address 5025 Wisconsin Ave NW

City State Zip Code  
 Washington DC 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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 07 / 2012

Transaction ID : 4331828

Amount of Each Receipt this Period

50.00

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

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

134.00

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JOHN COSTA**

Mailing Address 5025 Wisconsin Ave NW

City State Zip Code  
 Washington DC 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 ▼

450.00

Date of Receipt

09 / 07 / 2012

Transaction ID : 4331830

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. LAWRENCE J HANLEY**

Mailing Address 5025 Wisconsin Ave NW

City State Zip Code  
 Washington DC 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 ▼

720.00

Date of Receipt

09 / 07 / 2012

Transaction ID : 4331840

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. CLAUDIA HUDSON**

Mailing Address 5025 Wisconsin Ave NW

City State Zip Code  
 Washington DC 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 ▼

900.00

Date of Receipt

09 / 07 / 2012

Transaction ID : 4331841

Amount of Each Receipt this Period

100.00

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

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

230.00

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

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

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(check only one)

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

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. KENNETH R KIRK**

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 ▼

450.00

Date of Receipt

09 / 07 / 2012

Transaction ID : 4331843

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. STEPHAN MAC DOUGALL**

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

09 / 07 / 2012

Transaction ID : 4331844

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. WILLIAM G MC LEAN**

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 ▼

750.06

Date of Receipt

09 / 07 / 2012

Transaction ID : 4331845

Amount of Each Receipt this Period

83.34

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

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

183.34

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

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for each category of the  
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(check only one)

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

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. RICHARD MURPHY**

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 ▼

750.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2012

Transaction ID : 4331846

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

**B. JAVIER M PEREZ JR**

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 ▼

375.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2012

Transaction ID : 4331848

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

**C. SHAWN PERRY**

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

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2012

Transaction ID : 4331849

Amount of Each Receipt this Period

30.00

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

155.01

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

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. YVETTE SALAZAR**

Mailing Address 2713 EAST 132ND PLACE

City

THORNTON

State

CO

Zip Code

80241-2071

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 ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2012

Transaction ID : 4331855

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. DAN F SMITH**

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

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  
09 / 07 / 2012

Transaction ID : 4331856

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. LAURI STRAUGHAN**

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

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2012

Transaction ID : 4331858

Amount of Each Receipt this Period

40.00

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

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

140.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. CHARLES E WATSON**

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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2012

**Transaction ID : 4331861**

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

**B. ANTHONY WITHINGTON**

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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2012

**Transaction ID : 4331863**

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

**C. SHARON KELLY-VRONTOS**

Mailing Address 115 LARCHWOOD DRIVE

City

TURTLE CREEK

State

PA

Zip Code

15145-1125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PORT AUTH-ALLEG - PAT TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2012

**Transaction ID : 4331869**

Amount of Each Receipt this Period

25.00

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

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

108.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ROBERT J MAZZEI**

Mailing Address 1448 BALSAM DR

City

ALISON PK

State

PA

Zip Code

15101-3948

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PORT AUTH-ALLEG - PAT TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

336.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 07    |   | 2012        |

**Transaction ID : 4331870**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. ROBERT J KELLY**

Mailing Address 5126 N CENTRAL

City

CHICAGO

State

IL

Zip Code

60646-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHICAGO TRANSIT AUTHORITY RAIL

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 07    |   | 2012        |

**Transaction ID : 4332005**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. JACKIE L JETER**

Mailing Address 711 HAACK PLACE

City

UPPER MARLBORO

State

MD

Zip Code

20774-2164

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WASH METRO AREA TRANSIT AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

525.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 07    |   | 2012        |

**Transaction ID : 4332007**

Amount of Each Receipt this Period

75.00

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

167.00

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

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ROLAND H JETER**

Mailing Address 711 HAACK PLACE

City

UPPER MARLBORO

State

MD

Zip Code

20774-2164

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WASH METRO AREA TRANSIT AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
09 / 07 / 2012

Transaction ID : 4332009

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. ANTHONY W GARLAND**

Mailing Address 5602 BUTTERFIELD DRIVE

City

CLINTON

State

DC

Zip Code

20735-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WASH METRO AREA TRANSIT AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
09 / 07 / 2012

Transaction ID : 4332011

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. FRANKLIN E DODSON**

Mailing Address 26058 NO 1725 EAST ROAD

City

LEXINGTON

State

IL

Zip Code

61753-9383

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLOOMINGTON-NORM PUB TRANS SYS

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

MM / DD / YYYY  
09 / 07 / 2012

Transaction ID : 4332020

Amount of Each Receipt this Period

42.00

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

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

122.00

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

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

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL E LESESNE**

Mailing Address 9522 CAMELOT DRIVE

City

WINDSOR

State

CA

Zip Code

95492-7973

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLDEN GATE BRIDGE HIGHWAY TRAN

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2012

Transaction ID : 4333493

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. WILFRED M OWENS**

Mailing Address 336 OHIO STREET

City

VALLEJO

State

CA

Zip Code

94590-5053

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLDEN GATE BRIDGE HIGHWAY TRAN

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2012

Transaction ID : 4333526

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. RAYMOND B MESSIER**

Mailing Address 9198 WATER ROAD

City

COTATI

State

CA

Zip Code

94931-4271

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLDEN GATE BRIDGE HIGHWAY TRAN

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

Transaction ID : 4333820

Amount of Each Receipt this Period

27.50

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

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

99.50

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. WILLIAM A BLAIR**

Mailing Address 25 FRONTIER RD

City

WARWICK

State

RI

Zip Code

02889

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

Transaction ID : 4334095

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. KEVIN M COLE**

Mailing Address 51 NORTH STREET

City

CRANSTON

State

RI

Zip Code

02920

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 ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

Transaction ID : 4334104

Amount of Each Receipt this Period

7.00

Full Name (Last, First, Middle Initial)

**C. DENNIS CONNOLLY**

Mailing Address 69 WHITEROCK ROAD

P O BOX 66

City

WESTERLY

State

RI

Zip Code

02891

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 ▼

318.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

Transaction ID : 4334105

Amount of Each Receipt this Period

9.00

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

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

21.00

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JOHN A CRUZ**

Mailing Address 118 THIRD BEACH ROAD

City State Zip Code  
MIDDLETOWN RI 02842-5762

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 ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : 4334106**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. KENNETH M D'AMBROSIO**

Mailing Address 43 BAGLEY AVE

City State Zip Code  
CRANSTON RI 02920

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : 4334108**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. ROBERT E DAVIS JR**

Mailing Address 82 VILLAGE DRIVE

City State Zip Code  
EAST PROVIDENCE RI 02915

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 ▼

257.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : 4334111**

Amount of Each Receipt this Period

7.50

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

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

37.50

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

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ADRIAN DELGADO JR**

Mailing Address 182 GROSVENOR AVENUE

City State Zip Code  
EAST PROVIDENCE RI 02914

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 ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : 4334115**

Amount of Each Receipt this Period

12.00

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER LEMIRE**

Mailing Address 110 KICKEMUIT ROAD

City State Zip Code  
WARREN RI 02885

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 ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : 4334144**

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

**C. DAVID LEMIRE**

Mailing Address 110 KICKEMUIT ROAD

City State Zip Code  
WARREN RI 02885

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : 4334145**

Amount of Each Receipt this Period

10.00

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

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

28.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ROGER LIMA JR**

Mailing Address 4 JACKSON ST

City State Zip Code  
 NORTH PROVIDENCE RI 02904-4223

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 ▼

380.00

Date of Receipt

09 / 24 / 2012

Transaction ID : 4334146

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. ANTHONY MACHADO**

Mailing Address 85 MAPLE STREET

City State Zip Code  
 COVENTRY RI 02816-5404

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 ▼

420.00

Date of Receipt

09 / 24 / 2012

Transaction ID : 4334148

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. DESIREE L MATHIEU**

Mailing Address 233 WATERMAN AVENUE

City State Zip Code  
 E PROVIDENCE RI 02914

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 ▼

221.00

Date of Receipt

09 / 24 / 2012

Transaction ID : 4334156

Amount of Each Receipt this Period

12.00

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

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

32.00

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

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

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. RAYMOND MATTHIEW**

Mailing Address 62 TOBIE AVENUE

City

PAWTUCKET

State

RI

Zip Code

02861-2912

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 ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

Transaction ID : 4334157

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

**B. THOMAS MILLS**

Mailing Address 96 VEAZIE STREET

City

PROVIDENCE

State

RI

Zip Code

02908

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 ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

Transaction ID : 4334162

Amount of Each Receipt this Period

9.00

Full Name (Last, First, Middle Initial)

**C. VIRGINIA A MOFFITT**

Mailing Address 90 GRANT AVE

City

CRANSTON

State

RI

Zip Code

02920-7718

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 ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

Transaction ID : 4334163

Amount of Each Receipt this Period

10.00

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

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

25.00

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

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

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(check only one)

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☐ 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. LYDIA E PERDOMO**

Mailing Address 219 SACKETT STREET

City State Zip Code  
PROVIDENCE RI 02907

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 ▼

282.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : 4334176**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. FRANCIS F PLUTZNER**

Mailing Address 361 DOROC AVENUE

City State Zip Code  
CRANSTON RI 02910

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 ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : 4334178**

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

**C. RUTH SULLIVAN**

Mailing Address 68 NARRAGANSETT AVENUE

City State Zip Code  
TIVERTON RI 02878-4620

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 ▼

418.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : 4334189**

Amount of Each Receipt this Period

11.00

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

22.00

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

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. OWEN C SWEETLAND**

Mailing Address 139 ROUNDS AVENUE

City

RIVERSIDE

State

RI

Zip Code

02915-1737

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 ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

Transaction ID : 4334190

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. ERIC ST PIERRE**

Mailing Address 46 HIGH STREET

City

WARWICK

State

RI

Zip Code

02886

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 ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

Transaction ID : 4334191

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. ROBERT J WILLIAMSON**

Mailing Address 63 GIBBONS AVENUE

City

WARWICK

State

RI

Zip Code

02889

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

Transaction ID : 4334198

Amount of Each Receipt this Period

5.00

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

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

35.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. GARCELL BULLOCK**

Mailing Address 838 CORIANDER DRIVE  
APT V

City State Zip Code  
TORRANCE CA 90502-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LOS ANGELES CTY METRO TRAN AUT

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  
09 / 24 / 2012

Transaction ID : 4334586

Amount of Each Receipt this Period

12.50

Full Name (Last, First, Middle Initial)

## **B. CARLOS CURIEL JR**

Mailing Address 12821 N RIM WAY

City State Zip Code  
RANCHO CUCAMONGA CA 91739-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LOS ANGELES CTY METRO TRAN AUT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 24 / 2012

Transaction ID : 4334652

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **C. HAGOP H HAGOPIAN**

Mailing Address 527 E CHEVY CHASE DRIVE  
#1

City State Zip Code  
GLENDALE CA 91205-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LOS ANGELES CTY METRO TRAN AUT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.28

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 24 / 2012

Transaction ID : 4334796

Amount of Each Receipt this Period

20.84

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

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

53.34

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. HOLMAN F CARTER**

Mailing Address 640 ARAPAHOE RD  
APT 3

City State Zip Code  
BOULDER CO 80302-5920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REGIONAL TRANSPORTATION DIST

Occupation  
Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 08 2012

Transaction ID : 4387250

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. STANLEY GRONEK**

Mailing Address 1531 48TH STREET

City State Zip Code  
BOULDER CO 80303-1143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REGIONAL TRANSPORTATION DIST

Occupation  
Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 08 2012

Transaction ID : 4387251

Amount of Each Receipt this Period

88.00

Full Name (Last, First, Middle Initial)

**C. NANCY J REED**

Mailing Address 70 CASTLE SHANNON BLVD

City State Zip Code  
PITTSBURGH PA 15228

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 ▼

443.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 08 2012

Transaction ID : 4387253

Amount of Each Receipt this Period

49.25

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

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

237.25

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. MARY JO NEUMONT**

Mailing Address 376 Anawanda Ave.

City State Zip Code  
Pittsburgh PA 15228-2439

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 ▼

337.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 08 / 2012

Transaction ID : 4387254

Amount of Each Receipt this Period

37.50

Full Name (Last, First, Middle Initial)

**B. CLYDE L BECKHAM JR**

Mailing Address 5951 14TH STREET

City State Zip Code  
SACRAMENTO CA 95822-2907

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SACRAMENTO REG TRANSIT DIST

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  
09 / 08 / 2012

Transaction ID : 4387255

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. VICTOR M GUERRA**

Mailing Address 3929 TULE STREET

City State Zip Code  
WEST SACRAMENTO CA 95691-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SACRAMENTO REG TRANSIT DIST

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  
09 / 08 / 2012

Transaction ID : 4387256

Amount of Each Receipt this Period

25.00

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

87.50

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JOSEPH J BAHORICH**

Mailing Address 3013 WOODVIEW DRIVE

City State Zip Code  
 ALLISON PARK PA 15101

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 ▼

229.24

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 08 2012

Transaction ID : 4387259

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

**B. NAOMI I MABON**

Mailing Address 424 S DRAKE ROAD

City State Zip Code  
 KALAMAZOO MI 49009-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CITY OF KALAMAZOO

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

181.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 08 2012

Transaction ID : 4387283

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. NAOMI I MABON**

Mailing Address 424 S DRAKE ROAD

City State Zip Code  
 KALAMAZOO MI 49009-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CITY OF KALAMAZOO

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

191.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 08 2012

Transaction ID : 4387284

Amount of Each Receipt this Period

10.00

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

40.84

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

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

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☐ 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. NAOMI I MABON**

Mailing Address 424 S DRAKE ROAD

City State Zip Code  
 KALAMAZOO MI 49009-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CITY OF KALAMAZOO

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 08 2012

Transaction ID : 4387285

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **B. RONALD L COX**

Mailing Address 8514 S SHYROCK RD

City State Zip Code  
 GLASFORD IL 61533-9458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GREATER PEORIA MASS TRAN DIST

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 08 2012

Transaction ID : 4387288

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **C. WILLIAM H MAC LUNNY**

Mailing Address 310 WILLIAM ST

City State Zip Code  
 EDWARDSVILLE PA 18704-0000

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 08 2012

Transaction ID : 4387356

Amount of Each Receipt this Period

325.00

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

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

345.00

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

Use separate schedule(s)  
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☒ 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. JAMES P FINN**

Mailing Address 142 PARK AVE

City

WILKES BARRE

State

PA

Zip Code

18702-4927

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 ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 08 / 2012

**Transaction ID : 4387357**

Amount of Each Receipt this Period

276.00

Full Name (Last, First, Middle Initial)

**B. JUSTIN DAVIS**

Mailing Address 15 HURBANE STREET

City

PRINGLE

State

PA

Zip Code

18704-1834

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 08 / 2012

**Transaction ID : 4387358**

Amount of Each Receipt this Period

205.00

Full Name (Last, First, Middle Initial)

**C. GRACE GUERRERO**

Mailing Address 139 POPLAR STREET

City

RIDGEFIELD PARK

State

NJ

Zip Code

07660-1517

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 ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 17 / 2012

**Transaction ID : 4387480**

Amount of Each Receipt this Period

41.67

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

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

522.67

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. TONIA STARKEY-OBA**

Mailing Address 84 VERSAILLES COURT

City State Zip Code  
CINCINNATI OH 45240-3831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SW OHIO REGIONAL TRANSIT AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 17 / 2012

Transaction ID : 4387482

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. VIVIAN HART-TAYLOR**

Mailing Address 207 LEE PLACE

City State Zip Code  
PLAINFIELD NJ 07063-1334

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW JERSEY TRANSIT BUS OPER

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 17 / 2012

Transaction ID : 4387483

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. DAVID FORD**

Mailing Address 25 CHEVERLY ROAD

City State Zip Code  
LAWRENCEVILLE NJ 08648-3405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW JERSEY TRANSIT-MERCER INC

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.84

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 17 / 2012

Transaction ID : 4387755

Amount of Each Receipt this Period

38.48

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

88.48

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 99 OF 147  
(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)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ARTHUR SIELICKI**

Mailing Address 1726 EXTON AVENUE

City  
TRENTONState  
NJZip Code  
08610-3321FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW JERSEY TRANSIT-MERCER INC

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.36

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 17    | / | 2012        |

Transaction ID : 4387756

Amount of Each Receipt this Period

38.48

Full Name (Last, First, Middle Initial)

**B. STEPHEN SZUCSIK**

Mailing Address 8 CASTLE LANE

City

BURLINGTON

State

NJ

Zip Code

08016-5122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW JERSEY TRANSIT-MERCER INC

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.22

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 17    | / | 2012        |

Transaction ID : 4387757

Amount of Each Receipt this Period

28.86

Full Name (Last, First, Middle Initial)

**C. BAYYAN BANKS**Mailing Address 615 WASHINGTON AVENUE  
2ND FLOOR

City

BELLEVILLE

State

NJ

Zip Code

07109-2819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N J TRANSIT BUS OPER INC

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 17    | / | 2012        |

Transaction ID : 4387773

Amount of Each Receipt this Period

25.00

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

92.34

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. YISSEL ALMONTE**

Mailing Address 545 60TH STREET  
APT 2A

City State Zip Code  
WEST NEW YORK NJ 07093-1378

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N J TRANSIT BUS OPER INC

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 17 / 2012

**Transaction ID : 4387961**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

## **B. JOSEPH COSTA JR**

Mailing Address 30 JACOB STREET

City State Zip Code  
OLD BRIDGE NJ 08857-2257

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 17 / 2012

**Transaction ID : 4388011**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. ESTEBAN DELGADO**

Mailing Address 83 JACKSON AVENUE  
2ND FLOOR

City State Zip Code  
WOODLAND PARK NJ 07424-3333

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 17 / 2012

**Transaction ID : 4388069**

Amount of Each Receipt this Period

25.00

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

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

55.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. STANLEY G WILLIAMS JR**

Mailing Address 8 WINDING LANE

City

BLOOMFIELD

State

NJ

Zip Code

07003-4311

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 ▼

210.00

Date of Receipt

09 / 21 / 2012

Transaction ID : 4388288

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. LARRY ESPINOSA**

Mailing Address P O BOX 2801

City

CLIFTON

State

NJ

Zip Code

07015-2801

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

09 / 21 / 2012

Transaction ID : 4388304

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. ESTEBAN DELGADO**

Mailing Address 83 JACKSON AVENUE  
2ND FLOOR

City

WOODLAND PARK

State

NJ

Zip Code

07424-3333

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 ▼

250.00

Date of Receipt

09 / 21 / 2012

Transaction ID : 4388321

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**

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. VIVIAN HART-TAYLOR**

Mailing Address 207 LEE PLACE

City State Zip Code  
 PLAINFIELD NJ 07063-1334

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NEW JERSEY TRANSIT BUS OPER

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 21 2012

**Transaction ID : 4388362**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. DAVID FORD**

Mailing Address 25 CHEVERLY ROAD

City State Zip Code  
 LAWRENCEVILLE NJ 08648-3405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NEW JERSEY TRANSIT-MERCER INC

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 21 2012

**Transaction ID : 4388468**

Amount of Each Receipt this Period

28.86

Full Name (Last, First, Middle Initial)

**C. STEPHEN SZUCSIK**

Mailing Address 8 CASTLE LANE

City State Zip Code  
 BURLINGTON NJ 08016-5122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NEW JERSEY TRANSIT-MERCER INC

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 21 2012

**Transaction ID : 4388469**

Amount of Each Receipt this Period

48.10

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

101.96

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ARTHUR SIELICKI**

Mailing Address 1726 EXTON AVENUE

City  
TRENTON

State  
NJ

Zip Code  
08610-3321

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW JERSEY TRANSIT-MERCER INC

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.84

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 21 / 2012

Transaction ID : 4388470

Amount of Each Receipt this Period

38.48

Full Name (Last, First, Middle Initial)

**B. BAYYAN BANKS**

Mailing Address 615 WASHINGTON AVENUE  
2ND FLOOR

City

BELLEVILLE

State

NJ

Zip Code

07109-2819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N J TRANSIT BUS OPER INC

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 21 / 2012

Transaction ID : 4388538

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. HOLMAN F CARTER**

Mailing Address 640 ARAPAHOE RD  
APT 3

City

BOULDER

State

CO

Zip Code

80302-5920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REGIONAL TRANSPORTATION DIST

Occupation

Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 21 / 2012

Transaction ID : 4388600

Amount of Each Receipt this Period

100.00

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

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

163.48

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NAME OF COMMITTEE (In Full)

AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. STANLEY GRONEK

Mailing Address 1531 48TH STREET

City

BOULDER

State

CO

Zip Code

80303-1143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REGIONAL TRANSPORTATION DIST

Occupation

Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 21 / 2012

Transaction ID : 4388605

Amount of Each Receipt this Period

132.00

Full Name (Last, First, Middle Initial)

B. YISSEL ALMONTE

Mailing Address 545 60TH STREET  
APT 2A

City

WEST NEW YORK

State

NJ

Zip Code

07093-1378

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N J TRANSIT BUS OPER INC

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 21 / 2012

Transaction ID : 4388701

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

C. JOSEPH COSTA JR

Mailing Address 30 JACOB STREET

City

OLD BRIDGE

State

NJ

Zip Code

08857-2257

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 21 / 2012

Transaction ID : 4388783

Amount of Each Receipt this Period

25.00

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

162.00

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. GRACE GUERRERO**

Mailing Address 139 POPLAR STREET

City State Zip Code  
 RIDGEFIELD PARK NJ 07660-1517

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 ▼

375.03

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 21 / 2012

Transaction ID : 4388815

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

## **B. ROOSEVELT DICKERSON**

Mailing Address 11 W MARRET AVE  
 APT 107

City State Zip Code  
 PALASADES PARK NJ 07650

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  
 09 / 21 / 2012

Transaction ID : 4388824

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **C. ROSARIO AMATO**

Mailing Address 963 LEONARDVILLE ROAD

City State Zip Code  
 ATLANTIC HIGHLANDS NJ 07716-2719

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 21 / 2012

Transaction ID : 4388878

Amount of Each Receipt this Period

25.00

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

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

86.67

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. CHERI L ADAMS**

Mailing Address 1304 E GARLAND

City State Zip Code  
 SPOKANE WA 99207-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SPOKANE TRANSIT AUTHORITY

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

Transaction ID : 4389005

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

## **B. JAMES D FITZGERALD**

Mailing Address 4608 EAST 13TH AVENUE

City State Zip Code  
 SPOKANE VALLEY WA 99212-3260

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SPOKANE TRANSIT AUTHORITY

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

Transaction ID : 4389018

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

## **C. KIMBERLY HEARNS**

Mailing Address 551 E 11 MILE  
 #10

City State Zip Code  
 MADISON HEIGHTS MI 48071-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SUBURBAN MOBILITY AUTH SMART

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

Transaction ID : 4389084

Amount of Each Receipt this Period

35.00

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

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

110.00

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. NELSON G TORRES**

Mailing Address 7736 PINE HAWKS LANE

City

ORLANDO

State

FL

Zip Code

32822-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CENTRAL FLORIDA RTA LYNX

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

Transaction ID : 4389198

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. ANDREA WALDEN**

Mailing Address 709 COLTON LANE

City

EVERSON

State

WA

Zip Code

98247-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WHATCOM TRANS AUTHORITY

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

Transaction ID : 4389202

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. DEL L WALKER**

Mailing Address PO BOX 30572

City

BELLINGHAM

State

WA

Zip Code

98228-2572

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WHATCOM TRANS AUTHORITY

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

Transaction ID : 4389203

Amount of Each Receipt this Period

12.00

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

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

47.00

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

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☐ 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. MICHAEL CORNELIUS**

Mailing Address 21220 N 23RD AVE  
APT 228

City State Zip Code  
PHOENIX AZ 85027-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ATC PHOENIX TRANSIT NEC

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.69

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 27 / 2012

**Transaction ID : 4389268**

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

**B. MICHAEL E LESESNE**

Mailing Address 9522 CAMELOT DRIVE

City State Zip Code  
WINDSOR CA 95492-7973

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLDEN GATE BRIDGE HIGHWAY TRAN

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : 4389331**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. WILFRED M OWENS**

Mailing Address 336 OHIO STREET

City State Zip Code  
VALLEJO CA 94590-5053

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLDEN GATE BRIDGE HIGHWAY TRAN

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : 4389340**

Amount of Each Receipt this Period

42.00

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

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

113.67

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

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

FOR LINE NUMBER: PAGE 109 OF 147  
(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. CURLEY M ROBINSON**

Mailing Address 9861 ST ELMO DRIVE

City

OAKLAND

State

CA

Zip Code

94603-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ALAMEDA-CONTRA COSTA TRANS DIS

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

Transaction ID : 4390008

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**B.**

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

45.00

7139.08

# **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 110 OF 147

☐ 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. Friends Of Tim Johnson**

Mailing Address PO Box 17097

City

Urbana

State

IL

Zip Code

61803

FEC ID number of contributing  
federal political committee.

C

C00350421

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 17 / 2012

**Transaction ID : 4316866**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**B.**

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1500.00

1500.00

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

PAGE 111 OF 147

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Cybersource Corp.**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 05    |   | 2012        |

Mailing Address 1295 Charleston Road

|              |       |          |
|--------------|-------|----------|
| City         | State | Zip Code |
| Mountainview | CA    | 94043    |

**Transaction ID : 4390013**Purpose of Disbursement  
Credit Card Processing Fee

Amount of Each Disbursement this Period

Candidate Name

|                   |
|-------------------|
| 001               |
| Category/<br>Type |

|       |
|-------|
| 46.95 |
|-------|

|                |                                                                                                         |
|----------------|---------------------------------------------------------------------------------------------------------|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State:         | District:                                                                                               |

|                   |                                                                   |
|-------------------|-------------------------------------------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼                        |

Credit Card Processing Fee

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|       |   |       |   |             |

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|      |       |          |

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

|                   |
|-------------------|
|                   |
| Category/<br>Type |

|  |
|--|
|  |
|--|

|                |                                                                                                         |
|----------------|---------------------------------------------------------------------------------------------------------|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State:         | District:                                                                                               |

|                   |                                                                   |
|-------------------|-------------------------------------------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼                        |

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|       |   |       |   |             |

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|      |       |          |

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

|                   |
|-------------------|
|                   |
| Category/<br>Type |

|  |
|--|
|  |
|--|

|                |                                                                                                         |
|----------------|---------------------------------------------------------------------------------------------------------|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State:         | District:                                                                                               |

|                   |                                                                   |
|-------------------|-------------------------------------------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼                        |

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

46.95

46.95

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

PAGE 112 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Pallone For Congress**

Mailing Address PO Box 3176

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Long Branch | NJ    | 07740    |

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Frank Pallone Jr.**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 06

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2012        |

**Transaction ID : 4288129**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Friends Of Dan Maffei**

Mailing Address PO Box 230

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Syracuse | NY    | 13201    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Daniel Maffei**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 24

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2012        |

**Transaction ID : 4288134**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Mullen For Congress**

Mailing Address PO Box 11665

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| South Bend | IN    | 46634    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Brendan Mullen**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 02

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2012        |

**Transaction ID : 4288136**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|         |
|---------|
| 6000.00 |
|---------|

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

PAGE 113 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Cicilline Committee**

Mailing Address 236 Hope Street

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Providence | State<br>RI | Zip Code<br>02906 |
|--------------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. David Cicilline**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: RI District: 01

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288137**

Amount of Each Disbursement this Period

|         |
|---------|
| 3000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Kirkpatrick For Arizona**

Mailing Address PO Box 12011

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>Casa Grande | State<br>AZ | Zip Code<br>85130 |
|---------------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Ms. Ann Kirkpatrick**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 01

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288138**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends Of John Barrow**

Mailing Address PO Box 1001

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Augusta | State<br>GA | Zip Code<br>30903 |
|-----------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. John Barrow**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: GA District: 12

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288139**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|          |
|----------|
| 10500.00 |
|----------|

|  |
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|  |
|--|

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

PAGE 114 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Bera For Congress**

Mailing Address Post Office Box 582496

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Elk Grove | CA    | 95758    |

Purpose of Disbursement  
Contribution

Candidate Name

**Amerish Bera**

|                |                                                                                                                    |
|----------------|--------------------------------------------------------------------------------------------------------------------|
| Office Sought: | <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State: CA      | District: 07                                                                                                       |

|                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------|
| Disbursement For: 2012                                                                                                     |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2012        |

**Transaction ID : 4288140**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Boswell For Congress**

Mailing Address PO Box 1814

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Des Moines | IA    | 50305    |

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Leonard Boswell**

|                |                                                                                                                    |
|----------------|--------------------------------------------------------------------------------------------------------------------|
| Office Sought: | <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State: IA      | District: 03                                                                                                       |

|                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------|
| Disbursement For: 2012                                                                                                     |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2012        |

**Transaction ID : 4288141**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Kathy Hochul For Congress**

Mailing Address PO Box 64

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Buffalo | NY    | 14231    |

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Kathleen Hochul**

|                |                                                                                                                    |
|----------------|--------------------------------------------------------------------------------------------------------------------|
| Office Sought: | <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State: NY      | District: 26                                                                                                       |

|                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------|
| Disbursement For: 2012                                                                                                     |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2012        |

**Transaction ID : 4288142**

Amount of Each Disbursement this Period

|         |
|---------|
| 3000.00 |
|---------|

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|         |
|---------|
| 8000.00 |
|---------|

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

PAGE 115 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. John Tierney For Congress**

Mailing Address 49 Federal Street

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>Salem | State<br>MA | Zip Code<br>01970 |
|---------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. John Tierney**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MA District: 06

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288143**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Enyart For Congress**

Mailing Address PO Box 308

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Belleville | State<br>IL | Zip Code<br>62222 |
|--------------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. William Enyart**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 12

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288144**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Julia Brownley For Congress**

Mailing Address 728 W Edna Place

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>Covina | State<br>CA | Zip Code<br>91722 |
|----------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Ms. Julia Brownley**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 26

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288145**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|          |
|----------|
| 10000.00 |
|----------|

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

PAGE 116 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. McDowell For Congress**

Mailing Address 10820 Glen Street

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Rudyard | MI    | 49780    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Gary McDowell**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 01

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288146**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Joe Miklosi For Congress**

Mailing Address PO Box 3975

|                   |       |          |
|-------------------|-------|----------|
| City              | State | Zip Code |
| Greenwood Village | CO    | 80155    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Joe Miklosi**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO District: 06

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288148**

Amount of Each Disbursement this Period

|         |
|---------|
| 3000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Mark Critz For Congress Committee**Mailing Address 647 Main Street  
Suite 110

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Johnstown | PA    | 15901    |

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Mark Critz**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 12

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288149**

Amount of Each Disbursement this Period

|         |
|---------|
| 3000.00 |
|---------|

Contribution

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

|         |
|---------|
| 8500.00 |
|---------|

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

PAGE 117 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Oceguera For Congress**

Mailing Address 3259 E. Warm Springs Road

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Las Vegas | NV    | 89120    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. John Oceguera**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NV District: 03

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288150**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Sean Patrick Maloney For Congress**

Mailing Address 18 W Main St

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Beacon | NY    | 12508    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Sean Maloney**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 18

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288152**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Nolan For Congress Volunteer Committee**

Mailing Address PO Box 1041

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Brainerd | MN    | 56401    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Richard Nolan**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN District: 08

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288155**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

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

|          |
|----------|
| 15000.00 |
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 118 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Carol Shea-Porter For Congress**

Mailing Address PO Box 453

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Rochester | NH    | 03866    |

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ms. Carol Shea-Porter**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NH District: 01

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288156**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Kreitlow For Congress**

Mailing Address 333 E Prairie View Road

|                |       |          |
|----------------|-------|----------|
| City           | State | Zip Code |
| Chippewa Falls | WI    | 54729    |

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mr. Patrick Kreitlow**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 07

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288157**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends Of Pete Gallego**

Mailing Address PO Box 1781

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| San Antonio | TX    | 78296    |

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mr. Pete Gallego**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 23

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288158**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

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

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| 15000.00 |
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 119 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Boockvar For Congress**Mailing Address 73 Old Dublin Pike  
Suite 10 #134

City Doylestown State PA Zip Code 18901

Purpose of Disbursement  
Contribution

Candidate Name

**Ms. Kathryn Boockvar**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 08

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288169**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Horsford For Congress**

Mailing Address 6100 Elton Ave Suite 1000

City Las Vegas State NV Zip Code 89107

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Steven Horsford**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NV District: 04

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288171**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Delbene For Congress**

Mailing Address PO Box 487

City Bothell State WA Zip Code 98041

Purpose of Disbursement  
Contribution

Candidate Name

**Ms. Suzan Delbene**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 01

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288172**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

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

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| 15000.00 |
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 120 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Cartwright For Congress**

Mailing Address 672 N River Street Suite 310

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>Plains | State<br>PA | Zip Code<br>18705 |
|----------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Matthew Cartwright**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 17

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288173**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Denny Heck For Congress**

Mailing Address PO Box 235

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Olympia | State<br>WA | Zip Code<br>98507 |
|-----------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Dennis Heck**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 10

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288174**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Obermueller For Congress**

Mailing Address PO Box 211682

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>Eagan | State<br>MN | Zip Code<br>55121 |
|---------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Michael Obermueller**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN District: 02

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288175**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

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| 10000.00 |
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 121 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Lois Frankel For Congress**

Mailing Address P.O. Box 775

|                 |       |          |
|-----------------|-------|----------|
| City            | State | Zip Code |
| West Palm Beach | FL    | 33402    |

Purpose of Disbursement  
Contribution

Candidate Name

**Ms. Lois Frankel**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 22

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2012        |

**Transaction ID : 4288176**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Hensley For Congress**

Mailing Address PO Box 620

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Raymore | MO    | 64083    |

Purpose of Disbursement  
Contribution

Candidate Name

**Ms. Teresa Hensley**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MO District: 04

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2012        |

**Transaction ID : 4288178**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. McNerney For Congress**

Mailing Address PO Box 690371

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Stockton | CA    | 95269    |

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Jerry McNerney**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 11

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2012        |

**Transaction ID : 4288179**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

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

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| 8500.00 |
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 122 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Garamendi For Congress**Mailing Address C/O California Political Law, Inc.  
3605 Long Beach Blvd., Ste. 426

City Long Beach State CA Zip Code 90807

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. John Garamendi**Office Sought: ☒ House  
☐ Senate  
☐ President  
State: CA District: 10Disbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2012        |

**Transaction ID : 4288182**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Quigley For Congress**

Mailing Address PO Box 13040

City Chicago State IL Zip Code 60613

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Michael Quigley**Office Sought: ☒ House  
☐ Senate  
☐ President  
State: IL District: 05Disbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2012        |

**Transaction ID : 4288184**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Sherman For Congress**

Mailing Address 777 S. Figueroa St., Ste. 4050

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Brad Sherman**Office Sought: ☒ House  
☐ Senate  
☐ President  
State: CA District: 27Disbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2012        |

**Transaction ID : 4288186**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
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Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

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| 4500.00 |
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 123 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. New York Jobs PAC**

Mailing Address PO Box 763

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Deer Park | NY    | 11729    |

Purpose of Disbursement  
Contribution

Candidate Name

**New York Jobs PAC**

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

|                   |                                            |                                  |
|-------------------|--------------------------------------------|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288188**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Jose Hernandez For Congress**

Mailing Address PO Box 1667

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Modesto | CA    | 95353    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Jose Hernandez**

|                |                                           |
|----------------|-------------------------------------------|
| Office Sought: | <input checked="" type="checkbox"/> House |
|                | <input type="checkbox"/> Senate           |
|                | <input type="checkbox"/> President        |

|                   |      |                                            |                                             |
|-------------------|------|--------------------------------------------|---------------------------------------------|
| Disbursement For: | 2012 | <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
|                   |      | <input type="checkbox"/> Other (specify) ▼ |                                             |

State: CA District: 10

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288189**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. People For Derek Kilmer**

Mailing Address PO Box 1574

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Gig Harbor | WA    | 98335    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Derek Kilmer**

|                |                                           |
|----------------|-------------------------------------------|
| Office Sought: | <input checked="" type="checkbox"/> House |
|                | <input type="checkbox"/> Senate           |
|                | <input type="checkbox"/> President        |

|                   |      |                                            |                                             |
|-------------------|------|--------------------------------------------|---------------------------------------------|
| Disbursement For: | 2012 | <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
|                   |      | <input type="checkbox"/> Other (specify) ▼ |                                             |

State: WA District: 06

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288190**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|          |
|----------|
| 12500.00 |
|----------|

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

PAGE 124 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Dave Crooks For Congress**Mailing Address 324 East Main Street  
PO Box 686

City Washington State IN Zip Code 47501

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. David Crooks**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 08

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288191**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Kaine For Virginia**

Mailing Address 2106 Hamilton Street Suite C

City Richmond State VA Zip Code 23230

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Timothy Kaine**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288192**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Heidi For Senate**

Mailing Address PO Box 1577

City Bismarck State ND Zip Code 58502

Purpose of Disbursement  
Contribution

Candidate Name

**Ms. Heidi Heitkamp**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: ND District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288194**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|          |
|----------|
| 12500.00 |
|----------|

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

PAGE 125 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. McCaskill For Missouri 2012**Mailing Address 700 13th Street NW  
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name

**Sen. Claire McCaskill**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MO District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288195**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Ohio Grassroots Victory Fund**

Mailing Address 709A 8th Street SE

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name

**Ohio Grassroots Victory Fund**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288196**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Marcia Fudge For Congress**

Mailing Address 3729 Silsby Rd

City University Heights State OH Zip Code 44118

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Marcia Fudge**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 11

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2012        |

**Transaction ID : 4288199**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|          |
|----------|
| 10000.00 |
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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 126 OF 147

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. Sires For Congress**

Mailing Address 6050 Blvd. East

City State Zip Code  
 West New York NJ 07093

Purpose of Disbursement  
 Contribution

Candidate Name

**Rep. Albio Sires**

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 13

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : 4296953**

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. Kind For Congress Committee**

Mailing Address 205 5th Avenue South

City State Zip Code  
 La Crosse WI 54601

Purpose of Disbursement  
 Contribution

Candidate Name

**Rep. Ron Kind**

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : 4296957**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

## **C. Moore For Congress**

Mailing Address PO Box 16646

City State Zip Code  
 Milwaukee WI 53216

Purpose of Disbursement  
 Contribution

Candidate Name

**Rep. Gwendolynne Moore**

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 04

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : 4296960**

Amount of Each Disbursement this Period

1000.00

Contribution

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

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

4500.00

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

PAGE 127 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Cicilline Committee**

Mailing Address 236 Hope Street

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Providence | State<br>RI | Zip Code<br>02906 |
|--------------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. David Cicilline**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: RI District: 01

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 13    |   | 2012        |

**Transaction ID : 4296961**

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Mark Pocan For Congress**

Mailing Address 309 N Baldwin St

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Madison | State<br>WI | Zip Code<br>53703 |
|-----------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Mark Pocan**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 02

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 18    |   | 2012        |

**Transaction ID : 4305920**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Joe Kennedy For Congress**

Mailing Address PO Box 590464

|                       |             |                   |
|-----------------------|-------------|-------------------|
| City<br>Newton Center | State<br>MA | Zip Code<br>02459 |
|-----------------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Joseph Kennedy**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MA District: 04

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 24    |   | 2012        |

**Transaction ID : 4316496**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|         |
|---------|
| 7000.00 |
|---------|

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

PAGE 128 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Ellison For Congress**

Mailing Address PO Box 6072

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Minneapolis | MN    | 55406    |

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Keith Ellison**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN District: 05

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 28    |   | 2012      |

**Transaction ID : 4323769**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Tim Walz For US Congress**

Mailing Address PO Box 938

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Mankato | MN    | 56002    |

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Timothy Walz**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN District: 01

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 28    |   | 2012      |

**Transaction ID : 4323771**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends Of Patrick Murphy**

Mailing Address 4521 Pga Blvd. #412

|                    |       |          |
|--------------------|-------|----------|
| City               | State | Zip Code |
| Palm Beach Gardens | FL    | 33418    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Patrick Murphy**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 18

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 28    |   | 2012      |

**Transaction ID : 4323772**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

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| 7000.00 |
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 129 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Sal Pace For Congress**

Mailing Address PO Box 1510

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Pueblo | CO    | 81002    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Salvatore Pace**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO District: 03

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323773**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Wall For Congress**

Mailing Address PO Box 1145

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Green Bay | WI    | 54305    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. James Wall**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 08

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323775**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Donnelly For Indiana**

Mailing Address 1050 17th St NW Ste 590

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20036    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Joseph Donnelly**Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323776**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Contribution

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

8500.00

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

PAGE 130 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Indiana Democratic Congressional Victory Committee**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 28    | / | 2012        |

Mailing Address 115 W Washington Street  
Suite 1165

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement  
Contribution

011

**Transaction ID : 4323777**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Candidate Name

**Indiana Democratic Congressional Victory Committee**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Contribution

State: District:

Full Name (Last, First, Middle Initial)

**B. Paul Tonko For Congress**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 28    | / | 2012        |

Mailing Address 911 Central Avenue  
PO Box 221

City Albany State NY Zip Code 12206

Purpose of Disbursement  
Contribution

011

**Transaction ID : 4323783**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Candidate Name

**Rep. Paul Tonko**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012 ☐ Primary ☒ General  
☐ Other (specify) ▼

Contribution

State: NY District: 20

Full Name (Last, First, Middle Initial)

**C. Friends Of Chris Murphy**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 28    | / | 2012        |

Mailing Address PO Box 127

City Cheshire State CT Zip Code 06410

Purpose of Disbursement  
Contribution

011

**Transaction ID : 4323786**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Candidate Name

**Mr. Christopher Murphy**Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2012 ☐ Primary ☒ General  
☐ Other (specify) ▼

Contribution

State: CT District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|          |
|----------|
| 15000.00 |
|----------|

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

PAGE 131 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Friends of Juan Vargas**

Mailing Address 5429 Madison Ave

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Sacramento | CA    | 95841    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Juan Vargas**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 51

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323788**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Marc Veasey Congressional Campaign Committee**

Mailing Address PO Box 50084

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Fort Worth | TX    | 76105    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Marc Veasey**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 33

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323789**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Enyart For Congress**

Mailing Address PO Box 308

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Belleville | IL    | 62222    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. William Enyart**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 12

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323790**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

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

|          |
|----------|
| 10000.00 |
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 132 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Montanans For Tester**

Mailing Address PO Box 3171

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Billings | MT    | 59103    |

Purpose of Disbursement  
Contribution

Candidate Name

**Sen. Jon Tester**

|                |                                            |
|----------------|--------------------------------------------|
| Office Sought: | <input type="checkbox"/> House             |
|                | <input checked="" type="checkbox"/> Senate |
|                | <input type="checkbox"/> President         |

Disbursement For: 2012

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

State: MT District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323792**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Tim Bishop For Congress**

Mailing Address PO Box 437

|              |       |          |
|--------------|-------|----------|
| City         | State | Zip Code |
| Farmingville | NY    | 11738    |

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Timothy Bishop**

|                |                                           |
|----------------|-------------------------------------------|
| Office Sought: | <input checked="" type="checkbox"/> House |
|                | <input type="checkbox"/> Senate           |
|                | <input type="checkbox"/> President        |

Disbursement For: 2012

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

State: NY District: 01

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323797**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Joe Miklosi For Congress**

Mailing Address PO Box 3975

|                   |       |          |
|-------------------|-------|----------|
| City              | State | Zip Code |
| Greenwood Village | CO    | 80155    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Joe Miklosi**

|                |                                           |
|----------------|-------------------------------------------|
| Office Sought: | <input checked="" type="checkbox"/> House |
|                | <input type="checkbox"/> Senate           |
|                | <input type="checkbox"/> President        |

Disbursement For: 2012

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

State: CO District: 06

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323799**

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Contribution

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

|         |
|---------|
| 7000.00 |
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 133 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Friends Of John Delaney**

Mailing Address PO Box 60320

City  
PotomacState  
MDZip Code  
20854Purpose of Disbursement  
Debt Retirement

011

Candidate Name

**Mr. John Delaney**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 06

Primary Debt 2012

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323802**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Debt Retirement

Full Name (Last, First, Middle Initial)

**B. Stephen F. Lynch For Congress Committee**

Mailing Address 105 Farragut Road

City  
South BostonState  
MAZip Code  
02127Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Stephen Lynch**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MA District: 08

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323805**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends Of David Gill**

Mailing Address PO Box 163

City  
SavoyState  
ILZip Code  
61874Purpose of Disbursement  
Contribution

011

Candidate Name

**Mr. David Gill**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323808**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

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| 15000.00 |
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 134 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Citizens To Elect Rick Larsen**

Mailing Address PO Box 326

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Everett | State<br>WA | Zip Code<br>98206 |
|-----------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Rick Larsen**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 02

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323809**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Kyrsten Sinema For Congress**

Mailing Address PO Box 25879

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>Tempe | State<br>AZ | Zip Code<br>85285 |
|---------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Kyrsten Sinema**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 09

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323811**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends Of Elizabeth Esty**

Mailing Address PO Box 61

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Cheshire | State<br>CT | Zip Code<br>06410 |
|------------------|-------------|-------------------|

Purpose of Disbursement  
Contribution

Candidate Name

**Ms. Elizabeth Esty**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CT District: 05

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323812**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

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| 15000.00 |
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 135 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Pascrell For Congress**

Mailing Address P.O. Box 640

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Totowa | NJ    | 07511    |

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. William Pascrell Jr.**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 09

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323813**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Scott Peters for Congress**Mailing Address 330 Encinitas Blvd  
Suite 101

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Encinitas | CA    | 92024    |

Purpose of Disbursement  
Contribution

Candidate Name

**Scott Peters**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 52

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323815**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Cartwright For Congress**

Mailing Address 672 N River Street Suite 310

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Plains | PA    | 18705    |

Purpose of Disbursement  
Debt Retirement

Candidate Name

**Mr. Matthew Cartwright**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼  
Primary Debt 2012

State: PA District: 17

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323817**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Debt Retirement

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

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| 15000.00 |
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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 136 OF 147

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. Lois Frankel For Congress**

Mailing Address P.O. Box 775

City State Zip Code  
 West Palm Beach FL 33402

Purpose of Disbursement  
 Contribution

Candidate Name

**Ms. Lois Frankel**

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 22

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
 09 28 2012

**Transaction ID : 4323818**

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. Grace For New York**

Mailing Address 49-04 43rd Ave

City State Zip Code  
 Woodside NY 11377

Purpose of Disbursement  
 Contribution

Candidate Name

**Ms. Grace Meng**

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 06

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
 09 28 2012

**Transaction ID : 4323819**

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

## **C. Tammy Baldwin For Senate**

Mailing Address P.O. Box 696

City State Zip Code  
 Madison WI 53701

Purpose of Disbursement  
 Contribution

Candidate Name

**Rep. Tammy Baldwin**

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
 09 28 2012

**Transaction ID : 4323820**

Amount of Each Disbursement this Period

2500.00

Contribution

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

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

10000.00

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

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

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Democratic Executive Committee of Florida**

Mailing Address 214 South Bronough Street

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Tallahassee | FL    | 32301    |

Purpose of Disbursement  
Contribution

011

Candidate Name

**Democratic Executive Committee of Florida**Category/  
Type

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

|                   |                                            |                                  |
|-------------------|--------------------------------------------|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 28    |   | 2012      |

**Transaction ID : 4323821**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Alan Lowenthal For Congress**

Mailing Address 6380 Wilshire Blvd., #1612

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Los Angeles | CA    | 90048    |

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mr. Alan Lowenthal**Category/  
Type

|                |                                           |
|----------------|-------------------------------------------|
| Office Sought: | <input checked="" type="checkbox"/> House |
|                | <input type="checkbox"/> Senate           |
|                | <input type="checkbox"/> President        |

|                   |      |                                            |                                             |
|-------------------|------|--------------------------------------------|---------------------------------------------|
| Disbursement For: | 2012 | <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
|                   |      | <input type="checkbox"/> Other (specify) ▼ |                                             |

State: CA District: 47

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 28    |   | 2012      |

**Transaction ID : 4323823**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. Dan Lipinski For Congress**

Mailing Address P.O. Box 520

|                 |       |          |
|-----------------|-------|----------|
| City            | State | Zip Code |
| Western Springs | IL    | 60558    |

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Daniel Lipinski**Category/  
Type

|                |                                           |
|----------------|-------------------------------------------|
| Office Sought: | <input checked="" type="checkbox"/> House |
|                | <input type="checkbox"/> Senate           |
|                | <input type="checkbox"/> President        |

|                   |      |                                            |                                             |
|-------------------|------|--------------------------------------------|---------------------------------------------|
| Disbursement For: | 2012 | <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
|                   |      | <input type="checkbox"/> Other (specify) ▼ |                                             |

State: IL District: 03

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 28    |   | 2012      |

**Transaction ID : 4323824**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

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

|          |
|----------|
| 15000.00 |
|----------|

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

PAGE 138 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Friends Of Lois Capps**

Mailing Address P.O. Box 23940

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Santa Barbara | CA    | 93121    |

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Lois Capps**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 24

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323825**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**B. Friends Of Charlie Wilson**

Mailing Address P.O. Box 334

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Bridgeport | OH    | 43912    |

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Charles Wilson**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 06

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323826**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

**C. New York State Democratic Committee**Mailing Address 120 Broadway  
32nd Floor

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| New York | NY    | 10271    |

Purpose of Disbursement  
Contribution

Candidate Name

**New York State Democratic Committee**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323827**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Contribution

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

|          |
|----------|
| 10000.00 |
|----------|

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

PAGE 139 OF 147

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. New York State Democratic Committee**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

Mailing Address 120 Broadway  
32nd Floor

City New York State NY Zip Code 10271

Purpose of Disbursement  
Contribution

011

**Transaction ID : 4324184**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Candidate Name

**New York State Democratic Committee**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Contribution

State:

District:

Full Name (Last, First, Middle Initial)

**B. David Scott For Congress**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 30    |   | 2012        |

Mailing Address P.O. Box 960821

City Riverdale State GA Zip Code 30296

Purpose of Disbursement  
Contribution

011

**Transaction ID : 4326314**

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Candidate Name

**Rep. David Scott**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

Contribution

State: GA

District: 13

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Mailing Address

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

|         |
|---------|
| 4500.00 |
|---------|

|           |
|-----------|
| 289500.00 |
|-----------|

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 140 OF 147

|                              |                                         |                              |                              |                             |                              |
|------------------------------|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 checked="" 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. LOCAL UNION 1575**Mailing Address 185 N Redwood Dr  
Suite 220

City San Rafael State CA Zip Code 94903

Purpose of Disbursement  
Refund of Misdeposited Funds, Reported in Aug 2012

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 18    |   | 2012        |

**Transaction ID : 4305728**

Amount of Each Disbursement this Period

|        |
|--------|
| 334.80 |
|--------|

Refund of Misdeposited Funds, Reported in Aug 2012

**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) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|       |   |       |   |             |

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) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|       |   |       |   |             |

Amount of Each Disbursement this Period

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|  |
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|        |
|--------|
| 334.80 |
|--------|

|        |
|--------|
| 334.80 |
|--------|

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

PAGE 141 OF 147

|                              |                              |                              |                              |                                        |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|----------------------------------------|------------------------------|
| <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. Liias for Legislature**

Mailing Address PO Box 821

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Mukilteo | WA    | 98275    |

Purpose of Disbursement  
Marko Liias, STATE HOUSE 21st WA

Candidate Name

**WA Rep. Marko Liias**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 21

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2012        |

**Transaction ID : 4288200**

Amount of Each Disbursement this Period

|        |
|--------|
| 500.00 |
|--------|

Marko Liias, STATE HOUSE 21st WA

Full Name (Last, First, Middle Initial)

**B. Friends of Connie Pillich**

Mailing Address 9910 Forest Glen Drive

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Cincinnati | OH    | 45242    |

Purpose of Disbursement  
Connie Pillich, STATE HOUSE 28th OH

Candidate Name

**OH Rep. Connie Pillich**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 28

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 10    | / | 2012        |

**Transaction ID : 4295377**

Amount of Each Disbursement this Period

|        |
|--------|
| 750.00 |
|--------|

Connie Pillich, STATE HOUSE 28th OH

Full Name (Last, First, Middle Initial)

**C. Friends of Hubert Brown**

Mailing Address 5258 Lawrenceburg Road

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Harrison | OH    | 45030    |

Purpose of Disbursement  
Hubert Brown, STATE HOUSE 29th OH

Candidate Name

**Hubert Brown**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 29

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 10    | / | 2012        |

**Transaction ID : 4295378**

Amount of Each Disbursement this Period

|        |
|--------|
| 750.00 |
|--------|

Hubert Brown, STATE HOUSE 29th OH

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|         |
|---------|
| 2000.00 |
|---------|

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

PAGE 142 OF 147

|                              |                              |                              |                              |                                        |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|----------------------------------------|------------------------------|
| <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. Citizens for Marcie Maxwell**

Mailing Address PO Box 2048

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Renton | WA    | 98056    |

Purpose of Disbursement  
Marcie Maxwell, STATE HOUSE 41st WA

Candidate Name

**WA Rep. Marcie Maxwell**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 41

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 13    | / | 2012        |

**Transaction ID : 4296963**

Amount of Each Disbursement this Period

|        |
|--------|
| 900.00 |
|--------|

Marcie Maxwell, STATE HOUSE 41st WA

Full Name (Last, First, Middle Initial)

**B. Citizens to Elect Larry Seaquist**

Mailing Address PO Box 821

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Gig Harbor | WA    | 98335    |

Purpose of Disbursement  
Larry Seaquist, STATE HOUSE 26th WA

Candidate Name

**WA Rep. Larry Seaquist**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 26

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 13    | / | 2012        |

**Transaction ID : 4296964**

Amount of Each Disbursement this Period

|        |
|--------|
| 400.00 |
|--------|

Larry Seaquist, STATE HOUSE 26th WA

Full Name (Last, First, Middle Initial)

**C. Biviano for State Rep**

Mailing Address 1902 S Century Lane

|                |       |          |
|----------------|-------|----------|
| City           | State | Zip Code |
| Spokane Valley | WA    | 99037    |

Purpose of Disbursement  
Amy Biviano, STATE HOUSE 4th WA

Candidate Name

**Amy Biviano**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 04

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 13    | / | 2012        |

**Transaction ID : 4296965**

Amount of Each Disbursement this Period

|        |
|--------|
| 450.00 |
|--------|

Amy Biviano, STATE HOUSE 4th WA

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

|         |
|---------|
| 1750.00 |
|---------|

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

PAGE 143 OF 147

|                              |                              |                              |                              |                                        |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|----------------------------------------|------------------------------|
| <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. Friends of Dennis Dellwo**

Mailing Address PO Box 31102

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Spokane | State<br>WA | Zip Code<br>99223 |
|-----------------|-------------|-------------------|

Purpose of Disbursement  
Dennis Dellwo, STATE HOUSE 6th WA

Candidate Name

**Dennis Dellwo**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 06

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 13    | / | 2012        |

**Transaction ID : 4296966**

Amount of Each Disbursement this Period

|        |
|--------|
| 200.00 |
|--------|

Dennis Dellwo, STATE HOUSE 6th WA

Full Name (Last, First, Middle Initial)

**B. Friends of Marcus Riccelli**

Mailing Address PO Box 1325

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Spokane | State<br>WA | Zip Code<br>99210 |
|-----------------|-------------|-------------------|

Purpose of Disbursement  
Marcus Riccelli, STATE HOUSE 3rd WA

Candidate Name

**Marcus Riccelli**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 03

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 13    | / | 2012        |

**Transaction ID : 4296967**

Amount of Each Disbursement this Period

|        |
|--------|
| 450.00 |
|--------|

Marcus Riccelli, STATE HOUSE 3rd WA

Full Name (Last, First, Middle Initial)

**C. Deluca for Legislator Committee**

Mailing Address 1438 Homestead Rd

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>Verona | State<br>PA | Zip Code<br>15147 |
|----------------|-------------|-------------------|

Purpose of Disbursement  
Anthony DeLuca, STATE HOUSE 32nd PA

Candidate Name

**Representa Anthony DeLuca**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 32

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 22    | / | 2012        |

**Transaction ID : 4313166**

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Anthony DeLuca, STATE HOUSE 32nd PA

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

|         |
|---------|
| 2650.00 |
|---------|

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

PAGE 144 OF 147

|                              |                              |                              |                              |                                        |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|----------------------------------------|------------------------------|
| <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. Friends of Matt Smith**

Mailing Address PO Box 13445

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Pittsburgh | PA    | 15243    |

Purpose of Disbursement  
Matt Smith, STATE SENATE 37th PA

Candidate Name

**Matt Smith**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 22    |   | 2012        |

**Transaction ID : 4313167**

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Matt Smith, STATE SENATE 37th PA

Full Name (Last, First, Middle Initial)

**B. Elect Bill Kortz Committee**

Mailing Address 514 Ridgeview Drive

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Dravosburg | PA    | 15034    |

Purpose of Disbursement  
William Kortz, STATE HOUSE 38th PA

Candidate Name

**PA Rep. William Kortz II**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 38

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 22    |   | 2012        |

**Transaction ID : 4313168**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

William Kortz, STATE HOUSE 38th PA

Full Name (Last, First, Middle Initial)

**C. Citizens to Re-Elect Bryan Barbin**

Mailing Address 206 Main Street

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Johnstown | PA    | 15901    |

Purpose of Disbursement  
Bryan Barbin, STATE HOUSE 71st PA

Candidate Name

**PA Rep. Bryan Barbin**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 71

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4322149**

Amount of Each Disbursement this Period

|        |
|--------|
| 350.00 |
|--------|

Bryan Barbin, STATE HOUSE 71st PA

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|         |
|---------|
| 3350.00 |
|---------|

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

PAGE 145 OF 147

|                              |                              |                              |                              |                                        |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|----------------------------------------|------------------------------|
| <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. Friends of Dom Costa**

Mailing Address PO Box 38306

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Pittsburgh | PA    | 15238    |

Purpose of Disbursement  
Dom Costa, STATE HOUSE 21st PA

Candidate Name

**PA Rep. Dom Costa**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 21

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 28    | / | 2012        |

**Transaction ID : 4322150**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Dom Costa, STATE HOUSE 21st PA

Full Name (Last, First, Middle Initial)

**B. People for Matzie**

Mailing Address 315 Wilson Ave

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Ambridge | PA    | 15003    |

Purpose of Disbursement  
Robert Matzie, STATE HOUSE 16th PA

Candidate Name

**PA Rep. Robert Matzie**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 16

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 28    | / | 2012        |

**Transaction ID : 4322152**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Robert Matzie, STATE HOUSE 16th PA

Full Name (Last, First, Middle Initial)

**C. McCloud for Justice**

Mailing Address 710 Cherry Street

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Seattle | WA    | 98104    |

Purpose of Disbursement  
Sheryl McCloud, SUPREME CT JUSTICE 9th WA

Candidate Name

**Sheryl Gordon McCloud**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 28    | / | 2012        |

**Transaction ID : 4322153**

Amount of Each Disbursement this Period

|         |
|---------|
| 1800.00 |
|---------|

Sheryl McCloud, SUPREME CT JUSTICE 9th WA

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|         |
|---------|
| 3800.00 |
|---------|

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

PAGE 146 OF 147

|                              |                              |                              |                              |                                        |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|----------------------------------------|------------------------------|
| <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. Friends of Cyrus**

Mailing Address 929 109th Ave NE

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Bellevue | State<br>WA | Zip Code<br>98004 |
|------------------|-------------|-------------------|

Purpose of Disbursement  
Cyrus Habib, STATE HOUSE 48th WA

Candidate Name

**Cyrus Habib**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 48

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 28    | / | 2012        |

**Transaction ID : 4323764**

Amount of Each Disbursement this Period

|        |
|--------|
| 900.00 |
|--------|

Cyrus Habib, STATE HOUSE 48th WA

Full Name (Last, First, Middle Initial)

**B. Friends of Bob Ferguson**

Mailing Address PO Box 2405

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Seattle | State<br>WA | Zip Code<br>98111 |
|-----------------|-------------|-------------------|

Purpose of Disbursement  
Robert Ferguson, ATTORNEY GENERAL WA

Candidate Name

**Robert Ferguson**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 28    | / | 2012        |

**Transaction ID : 4323765**

Amount of Each Disbursement this Period

|         |
|---------|
| 1800.00 |
|---------|

Robert Ferguson, ATTORNEY GENERAL WA

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Jake Fey**

Mailing Address PO Box 1372

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>Tacoma | State<br>WA | Zip Code<br>98401 |
|----------------|-------------|-------------------|

Purpose of Disbursement  
Jake Fey, STATE HOUSE 27th WA

Candidate Name

**Jake Fey**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 27

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 28    | / | 2012        |

**Transaction ID : 4323766**

Amount of Each Disbursement this Period

|        |
|--------|
| 900.00 |
|--------|

Jake Fey, STATE HOUSE 27th WA

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|         |
|---------|
| 3600.00 |
|---------|

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

PAGE 147 OF 147

|                              |                              |                              |                              |                                        |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|----------------------------------------|------------------------------|
| <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. Ohio AFL-CIO**Mailing Address 395 E. Broad Street  
Suite 300

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Contribution - Voters First

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4323816**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution - Voters First

Full Name (Last, First, Middle Initial)

**B. Ohio AFL-CIO**Mailing Address 395 E. Broad Street  
Suite 300

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Void - Ohio AFL-CIO check dated 09/28/2012

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 28    |   | 2012        |

**Transaction ID : 4326578**

Amount of Each Disbursement this Period

|          |
|----------|
| -5000.00 |
|----------|

Void - Ohio AFL-CIO check dated 09/28/2012

Full Name (Last, First, Middle Initial)

**C. Ohio AFL-CIO**Mailing Address 395 E. Broad Street  
Suite 300

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Contribution - Voters First

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 30    |   | 2012        |

**Transaction ID : 4326579**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Contribution - Voters First

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|         |
|---------|
| 5000.00 |
|---------|

|          |
|----------|
| 22150.00 |
|----------|