

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

UTILITY WORKERS UNION OF AMERICA COPE

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2015"/> | | 40023.05 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 88244.75 | |
| (c) Total Receipts (from Line 19) | 12310.78 | 67175.59 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 100555.53 | 107198.64 |
| 7. Total Disbursements (from Line 31)..... | -23600.00 | -16956.89 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 124155.53 | 124155.53 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

UTILITY WORKERS UNION OF AMERICA COPE

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

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 4031.55 | 14140.40 |
| (ii) Unitemized | 8279.23 | 53035.19 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 12310.78 | 67175.59 |
| (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) | 12310.78 | 67175.59 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total 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))..... ▶ | 12310.78 | 67175.59 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 12310.78 | 67175.59 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 0.00 | 43.11 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0.00 | 43.11 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 6000.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | -7500.00 | -7500.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | -16100.00 | -15500.00 |
| 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)) .. | -23600.00 | -16956.89 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | -23600.00 | -16956.89 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 12310.78 | 67175.59 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 12310.78 | 67175.59 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 43.11 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 43.11 |

**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 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial)
A. GERALD ACOSTA

Mailing Address 407 E. SAINT JOHN ROAD

City State Zip Code
PHOENIX AZ 85022

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

Name of Employer Occupation
UWUA NATINAL REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
606.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : SA11AI.5824

Amount of Each Receipt this Period
121.26

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)
B. GREG S ADAMS

Mailing Address 2307 EMBURY PARK RD

City State Zip Code
DAYTON OH 45414

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

Name of Employer Occupation
UTILITY WORKERS UNION OF AMERI BOARD MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
327.24

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : SA11AI.5808

Amount of Each Receipt this Period
81.81

EXB MEMBER CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. JAMES ANDERSON

Mailing Address 2017 WEST BOROUGH DR

City State Zip Code
HEBRON KY 41048

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

Name of Employer Occupation
UWUA EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : SA11AI.5809

Amount of Each Receipt this Period
50.00

EXB MEMBER CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 253.07

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

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

| | | | |
|---|------------------------------|-----------------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 7 OF 22 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | | <input type="checkbox"/> 17 |

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

Full Name (Last, First, Middle Initial)
A. MARK BROOKS

Mailing Address **521 CENTRAL AVENUE**

| | | |
|--------------------------|--------------------|--------------------------|
| City NASHVILLE | State TN | Zip Code 37211 |
|--------------------------|--------------------|--------------------------|

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

| | |
|---------------------------------|---------------------------------|
| Name of Employer UWUA | Occupation NATL. REP. |
|---------------------------------|---------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **667.50**

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | / | 29 | / | 2015 |

Transaction ID : SA11AI.5825

Amount of Each Receipt this Period

| |
|--------|
| 133.50 |
|--------|

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)
B. NICHOLAS J CARACAPPA

Mailing Address **486 HAWKINS RD**

| | | |
|-----------------------|--------------------|--------------------------|
| City SELDEN | State NY | Zip Code 11784 |
|-----------------------|--------------------|--------------------------|

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

| | |
|--|---------------------------------|
| Name of Employer UTILITY WORKERS UNION | Occupation EXB MEMBER |
|--|---------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | / | 29 | / | 2015 |

Transaction ID : SA11AI.5816

Amount of Each Receipt this Period

| |
|-------|
| 50.00 |
|-------|

EXB MEMBER CONTRIBUTION

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

Mailing Address **2508 PHEASANT HOLLOW DR.**

| | | |
|---------------------------|--------------------|--------------------------|
| City PLAINSBORO | State NJ | Zip Code 08536 |
|---------------------------|--------------------|--------------------------|

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

| | |
|---------------------------------|---------------------------------|
| Name of Employer UWUA | Occupation EXB MEMBER |
|---------------------------------|---------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **409.04**

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | / | 29 | / | 2015 |

Transaction ID : SA11AI.5817

Amount of Each Receipt this Period

| |
|-------|
| 81.81 |
|-------|

EXB MEMBER CONTRIBUTION

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 265.31 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 8 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. KELLY COOPER
 Full Name (Last, First, Middle Initial)
 Mailing Address 520 MCNEILAN ROAD
 City WEST UNION State OH Zip Code 45693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UWUA Occupation EXB MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 556.30

Date of Receipt 05 / 29 / 2015
Transaction ID : SA11AI.5826
 Amount of Each Receipt this Period 111.26
 PAYROLL DEDUCTION

B. RICHARD COSSELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 284 MT. ETNA ROAD
 City SMITHTON State PA Zip Code 15479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UWUA Occupation NATL. REP.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 556.30

Date of Receipt 05 / 29 / 2015
Transaction ID : SA11AI.5827
 Amount of Each Receipt this Period 111.26
 PAYROLL DEDUCTION

C. REGINALD DAVIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 348 STUYVESANT AVENUE
 City BOOKLYN State NY Zip Code 11223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UWUA Occupation NATL. REP.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 303.20

Date of Receipt 05 / 29 / 2015
Transaction ID : SA11AI.5828
 Amount of Each Receipt this Period 60.64
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 283.16
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 22 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

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

Mailing Address 37 BRILL LANE

City POUGHQUAG State NY Zip Code 12570

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

Name of Employer UWUA Occupation SAFETY INSTRUCT.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **606.30**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : SA11AI.5829

Amount of Each Receipt this Period
121.26

PAYROLL DEDUCTION

B. PATRICK DILLON
Full Name (Last, First, Middle Initial)

Mailing Address 3534 TWIN SPRUCE DR.

City KALAMAZOO State MI Zip Code 49004

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

Name of Employer UWUA Occupation EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **818.10**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : SA11AI.5818

Amount of Each Receipt this Period
163.62

EXB MEMBER CONTRIBUTION

C. DANIEL DOMINGUEZ
Full Name (Last, First, Middle Initial)

Mailing Address 2847 PENASCO

City SAN CLEMENTE State CA Zip Code 92673

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

Name of Employer UWUA Occupation EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **409.04**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : SA11AI.5802

Amount of Each Receipt this Period
81.81

EXB MEMBER CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **366.69**

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

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 22 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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

A. JOHN DUFFY
 Full Name (Last, First, Middle Initial)
 Mailing Address 286 HOWARD ST.
 City WASHINGTON TOWNSHIP State NJ Zip Code 07676
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Utility Workers Union of Ameri Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1013.74

Date of Receipt 05 / 29 / 2015
Transaction ID : SA11AI.5830
 Amount of Each Receipt this Period 273.50
PAYROLL DEDUCTION

B. ARTURO FRIAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1317 MERCED AVENUE
 City SOUTH EL MONTE State CA Zip Code 61733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UWUA Occupation EXB MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 29 / 2015
Transaction ID : SA11AI.5801
 Amount of Each Receipt this Period 70.00
EXB MEMBER CONTRIBUTION

C. SHAWN GARVEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 GRAND AVENUE
 City LYNBROOK State NY Zip Code 11563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UWUA Occupation NATL. REPR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 606.30

Date of Receipt 05 / 29 / 2015
Transaction ID : SA11AI.5831
 Amount of Each Receipt this Period 121.26
PAYROLL DEDUCTION

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 464.76 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

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

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

Mailing Address 319 DIANA COURT

City Bensonville State IL Zip Code 60106

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

Name of Employer UWUA Occupation NATL. REPR.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **606.30**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015

Transaction ID : **SA11AI.5832**

Amount of Each Receipt this Period
 121.26

PAYROLL DEDUCTION

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

Mailing Address 21557 SHEFFIELD

City Farmington Hills State MI Zip Code 48335

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

Name of Employer UWUA Occupation EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **409.04**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015

Transaction ID : **SA11AI.5819**

Amount of Each Receipt this Period
 81.81

EXB MEMBER CONTRIBUTION

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

Mailing Address 3539 ARMOUR

City Port Huron State MI Zip Code 48060

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

Name of Employer UTILITY WORKERS UNION OF AMERI Occupation NATL. REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **606.30**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015

Transaction ID : **SA11AI.5833**

Amount of Each Receipt this Period
 121.26

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **324.33**

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 22 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) A. KEITH HOLMES | | Date of Receipt 05 / 29 / 2015 Transaction ID : SA11AI.5812 |
| Mailing Address 3827 ARENDELL AVENUE | | Amount of Each Receipt this Period 50.00 EXB MEMBER CONTRIBUTION |
| City PHILADELPHIA | State PA | Zip Code 19114 |
| FEC ID number of contributing federal political committee. C | Aggregate Year-to-Date 250.00 | |
| Name of Employer UWUA | Occupation EXB MEMBER | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. ROBERT HOUSER | | Date of Receipt 05 / 29 / 2015 Transaction ID : SA11AI.5834 |
| Mailing Address 42 RAVENWOOD BLVD | | Amount of Each Receipt this Period 121.26 PAYROLL DEDUCTION |
| City BARNEGAT | State NJ | Zip Code 08005 |
| FEC ID number of contributing federal political committee. C | Aggregate Year-to-Date 606.30 | |
| Name of Employer UWUA | Occupation NATL. REP. | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. LAWRENCE KELLEY | | Date of Receipt 05 / 29 / 2015 Transaction ID : SA11AI.5835 |
| Mailing Address 270 MANSFIELD RD | | Amount of Each Receipt this Period 81.08 PAYROLL DEDUCTION |
| City WASHINGTON | State PA | Zip Code 15301 |
| FEC ID number of contributing federal political committee. C | Aggregate Year-to-Date 405.40 | |
| Name of Employer UWUA | Occupation NATL. REP. | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 252.34 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

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

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

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

Mailing Address 1977 YALE AVENUE

City WILLIAMSPORT State PA Zip Code 17701

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

Name of Employer Utility Workers Union of Ameri Occupation National Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **606.30**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SA11AI.5836

Amount of Each Receipt this Period
121.26

PAYROLL DEDUCTION

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

Mailing Address 1 PINE TREE CIRCLE

City SANDWHICH State MA Zip Code 02563

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

Name of Employer UWUA Occupation EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SA11AI.5806

Amount of Each Receipt this Period
80.00

EXB MEMBER CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. JAMES LEWIS

Mailing Address 2120 LONDERGRAN STREET

City PITTSBURGH State PA Zip Code 15216

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

Name of Employer UWUA Occupation NAT. REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **606.30**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SA11AI.5837

Amount of Each Receipt this Period
121.26

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **322.52**

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

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

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

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

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

Full Name (Last, First, Middle Initial)
A. NANCY LOGAN

Mailing Address 2308 ARTHUR ST.

City State Zip Code
LOS ANGELES CA 90065

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

Name of Employer Occupation
UWUA EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
409.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : SA11AI.5815

Amount of Each Receipt this Period
81.81

EXB MEMBER CONTRIBUTION

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

Mailing Address 217 PONDEROSA AVENUE

City State Zip Code
HANOVER MA 02339

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

Name of Employer Occupation
UWUA NATL. REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
606.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : SA11AI.5838

Amount of Each Receipt this Period
121.26

PAYROLL DEDUCTION

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

Mailing Address 1100 WESTBORO

City State Zip Code
BIRMINGHAM MI 48009

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

Name of Employer Occupation
UWUA NATL. REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
667.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : SA11AI.5839

Amount of Each Receipt this Period
133.50

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 336.57

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 15 OF 22
(check only one)

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

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

A. FRANK MEZNARICH Sr.
Full Name (Last, First, Middle Initial)
Mailing Address 4710 E. PLEASANT VALLEY RD
City INDEPENDENCE State OH Zip Code 44131
FEC ID number of contributing federal political committee. **C**
Name of Employer UWUA Occupation EXB MEMBER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **546.00**

Date of Receipt **05 / 29 / 2015**
Transaction ID : SA11AI.5807
Amount of Each Receipt this Period **109.20**
EXB MEMBER CONTRIBUTION

B. RICHARD PASSARELLI
Full Name (Last, First, Middle Initial)
Mailing Address 2347 WOODVIEW LANE
City NAPERVILLE State IL Zip Code 60565
FEC ID number of contributing federal political committee. **C**
Name of Employer UWUA Occupation EXB MEMBER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **409.03**

Date of Receipt **05 / 29 / 2015**
Transaction ID : SA11AI.5820
Amount of Each Receipt this Period **81.81**
EXB MEMBER CONTRIBUTION

C. JAMES SHILLITTO
Full Name (Last, First, Middle Initial)
Mailing Address 67 EDMORE LANE N
City W ISLIP State NY Zip Code 11795
FEC ID number of contributing federal political committee. **C**
Name of Employer UWUA Occupation EXB MEMBER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **409.04**

Date of Receipt **05 / 29 / 2015**
Transaction ID : SA11AI.5810
Amount of Each Receipt this Period **81.81**
EXB MEMBER CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **272.82**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 OF 22
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. BETH SIMON

Mailing Address **2057 S. OXFORD AVENUE**

City **LOS ANGELES** State **CA** Zip Code **90018**

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

Name of Employer **UWUA** Occupation **GRANT MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **556.30**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : **SA11AI.5840**

Amount of Each Receipt this Period
111.26

PAYROLL DEDUCTION

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

Mailing Address **53 BLACKBERRY WAY**

City **HOPEWELL JCT.** State **NY** Zip Code **12533**

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

Name of Employer **UWUA** Occupation **EXB MEMBER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **409.03**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : **SA11AI.5811**

Amount of Each Receipt this Period
81.81

EXB MEMBER CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MICHAEL P SMITH

Mailing Address **8603 ODOWLING**

City **ONSTED** State **MI** Zip Code **49265**

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

Name of Employer **UTILITY WORKERS UNION OF AMERI** Occupation **EXECUTIVE BOARD MEMBER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : **SA11AI.5814**

Amount of Each Receipt this Period
100.00

EXB MEMBER CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **293.07**

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

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

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

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

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

Full Name (Last, First, Middle Initial)
A. ROBERT K STAHL
 Mailing Address 7415 DITMAS BLVD.
 City State Zip Code
 E. ELMHURST NY 11370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UTILITY WORKERS UNION OF AMERI BOARD MEMBER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : SA11AI.5821
 Amount of Each Receipt this Period
 50.00
 EXB MEMBER CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DAVID THOMPSON
 Mailing Address 2066 S ST. RT 231
 City State Zip Code
 TIFFIN OH 44883
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UTILITY WORKERS UNION OF AMERC EXB MEMBER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 409.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : SA11AI.5805
 Amount of Each Receipt this Period
 81.81
 EXB MEMBER CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. LISA M VELLA
 Mailing Address 147-06 17TH AVENUE
 City State Zip Code
 WHITESTONE NY 11357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UTILITY WORKERS UNION OF AMERI BOARD MEMBER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : SA11AI.5813
 Amount of Each Receipt this Period
 50.00
 EXB MEMBER CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 181.81
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 18 OF 22
(check only one)

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

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

A. RICHARD WHALEN
Full Name (Last, First, Middle Initial)

Mailing Address 203 RESERVOIR RD

City MT. PLEASANT State PA Zip Code 15666

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

Name of Employer UWUA Occupation EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 29 / 2015
Transaction ID : SA11AI.5822

Amount of Each Receipt this Period 300.00

EXB MEMBER CONTRIBUTION

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

Mailing Address 10103 LIVE OAK AVENUE

City CHERRY VALLEY State CA Zip Code 92223

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

Name of Employer UWUA Occupation NATL. REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 575.50

Date of Receipt 05 / 29 / 2015
Transaction ID : SA11AI.5841

Amount of Each Receipt this Period 115.10

PAYROLL DEDUCTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 415.10 |
| TOTAL This Period (last page this line number only).....▶ | 4031.55 |

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. LADD FOR WYOMING

Mailing Address PO BOX 1130

City WILSON State WY Zip Code 83014

Purpose of Disbursement
VOID UNCASHED CHECK FORM 10/01/2004

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 2 | 9 | | 2 | 0 | 1 | 5 |

Transaction ID : SB23.5785

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| - | 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. USACTION

Mailing Address 1825 K ST NW SUITE 210

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
VOID UNCASHED CHECK FROM 4/16/2003

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 2 | 9 | | 2 | 0 | 1 | 5 |

Transaction ID : SB23.5783

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

| | | | | | | |
|---|---|---|---|---|---|---|
| - | 7 | 5 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

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

| | | | | | | |
|---|---|---|---|---|---|---|
| - | 7 | 5 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. 2001 VICTORY FUND

Mailing Address PO BOX 9469

City ELIZAABETH State NJ Zip Code 07202

Purpose of Disbursement
VOID UNCASHED CHECK FROM 10/17/2001

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB29.5789

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ELECTION FUND OF THOMAS P. GIBLIN

Mailing Address PO BOX 43062

City MONTCLAIR State NJ Zip Code 07043

Purpose of Disbursement
VOID UNCASHED CHECK FROM 5/10/2013

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB29.5800

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JACK BACA JR FOR STATE ASSEMBLY 2012

Mailing Address PO BOX 402

City RIALTO State CA Zip Code 92377

Purpose of Disbursement
VOID UNCCASHED CHECK FROM 08/18/2011

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB29.5795

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. GLORIA FOR STATE SENATE ROMERO

Mailing Address PO BOX 32398

City LOS ANGELES State CA Zip Code 90032

Purpose of Disbursement
VOID UNCASHED CHECK FROM 10/17/2002

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SB29.5791

Amount of Each Disbursement this Period

-2500.00

Full Name (Last, First, Middle Initial)

B. GLORIA ROMERO FOR SENATE

Mailing Address 2107 W. COMMONWEALTH AVE.

City ALHAMBRA State CA Zip Code 91803

Purpose of Disbursement
VOID UNCASHED CHECK FROM 12/6/2000

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SB29.5787

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

C. KEVIN DE LEON FOR SENATE 2012

Mailing Address 1100 O STREET
SUITE 200

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
VOID UNCASHED CHECK FROM 5/3/2012

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SB29.5797

Amount of Each Disbursement this Period

-2500.00

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

-6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. KEVIN DE LEON FOR SENATE 2012

Mailing Address 1100 O STREET
SUITE 200

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
VOID UNCASHED CHECK FROM 6/5/2012

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SB29.5799

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

B. STEINBERG FOR SEANATE 2010

Mailing Address 1127 1 ST.
SUITE 242

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
VOID UNCASHED CEHECK FROM 10/22/2010

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : SB29.5793

Amount of Each Disbursement this Period

-3900.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

-4900.00

-16300.00