



Amalgamated Transit Union

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

Office of the International Secretary-Treasurer

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

SEP 13

11 07 AM '96

September 13, 1996

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

Dear Sir or Madam:

Enclosed please find a copy of the September 1996 Report covering the period of August 1, 1996 through August 31, 1996 for Amalgamated Transit Union - COPE.

Trusting this meets with your satisfaction, I am

Sincerely,

Oliver W. Green
International Secretary-
Treasurer/COPE Director

/fsg
Enclosure



REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM
SEP 13 11 07 AM '96

1. NAME OF COMMITTEE (in full) Amalgamated Transit Union - COPE		2. FEC IDENTIFICATION NUMBER C00032995
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 5025 Wisconsin Avenue, NW		
CITY, STATE and ZIP CODE Washington, DC 20016		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

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

Monthly Report Due On:

- February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
 Thirtieth day report following the General Election on _____
in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A	COLUMN B
5. Covering Period 8/1/96 through 8/31/96		This Period	Calendar Year-to-Date
6. (a)	Cash on Hand January 1, 19 96		\$ 123,638.94
(b)	Cash on Hand at Beginning of Reporting Period	\$ 197,634.29	
(c)	Total Receipts (from Line 19)	\$ 36,298.44	\$ 399,553.68
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 233,932.73	\$ 523,192.62
7.	Total Disbursements (from Line 30)	\$ 49,664.24	\$ 338,924.13
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 184,268.49	\$ 184,268.49
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ NONE	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ NONE	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Oliver W. Green	Date 9/13/96
Signature of Treasurer <i>Oliver W. Green</i>	

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

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
Amalgamated Transit Union - COPE		FROM 8/1/96	TO 8/31/96
		COLUMN A	COLUMN B
		Total This Period	Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		586.96	6,884.51
ii. Unitemized		34,850.90	387,667.81
iii. Total (add i and ii) >		35,437.86	394,552.32
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a ii, b and c) >		35,437.86	394,552.32
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		860.58	5,001.36
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		36,298.44	399,553.68
20. Total Federal Receipts (subtract line 18 from line 19) >		36,298.44	399,553.68
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			744.00
b. Other Federal Operating Expenditures			744.00
c. Total Operating Expenditures (add a ii, a iii, and b) >		10,164.24	91,780.13
22. Transfers to Affiliated/Other Party Committees		39,500.00	237,350.00
23. Contributions to Federal Candidates/Committees and Other Political Committees			
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >			9,050.00
29. Other Disbursements			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		49,664.24	338,924.13
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		49,664.24	338,924.13
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)		35,437.86	394,552.32
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans) (subtract line 33 from 32)		35,437.86	394,552.32
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			744.00
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from 35) >			744.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4

FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code
Earle W. Putnam
9116 Coronado Terrace
Fairfax, VA 22031

Name of Employer
Amalgamated Transit Union

Date (month, day, year)

Amount of Each Receipt this Period

-0-

Receipt For: Primary General
 Other (specify):

Occupation
General Counsel - Retired
Aggregate Year-to-Date > \$ 250.00

B. Full Name, Mailing Address and ZIP Code
Edgene F. Edwards
P.O. Box 1265
Medical Lake, WA 99022

Name of Employer
Retired

Date (month, day, year)

Amount of Each Receipt this Period

-0-

Receipt For: Primary General
 Other (specify):

Occupation
Operator
Aggregate Year-to-Date > \$ 250.00

C. Full Name, Mailing Address and ZIP Code
William G. McLean
594 Lochburry Court
San Jose, CA 95123

Name of Employer
Santa Clara County Transit District

Date (month, day, year)

Amount of Each Receipt this Period

8/12/96

26.87

Receipt For: Primary General
 Other (specify):

Occupation
Operator
Aggregate Year-to-Date > \$ 238.73

D. Full Name, Mailing Address and ZIP Code
Loretta A. Springer
1600 Decker Avenue
San Martin, CA 95046

Name of Employer
Santa Clara County Transity District

Date (month, day, year)

Amount of Each Receipt this Period

8/12/96

25.66

Receipt For: Primary General
 Other (specify):

Occupation
Operator
Aggregate Year-to-Date > \$ 227.94

E. Full Name, Mailing Address and ZIP Code
Al Triplett
6431 Ashley Street
Felton, CA 95018

Name of Employer
Santa Clara County Transit District

Date (month, day, year)

Amount of Each Receipt this Period

8/12/96

24.43

Receipt For: Primary General
 Other (specify):

Occupation
Operator
Aggregate Year-to-Date > \$ 217.03

F. Full Name, Mailing Address and ZIP Code
John W. Campbell
5259 Running Bear Drive
San Jose, CA 95136

Name of Employer
Santa Clara County Transit District

Date (month, day, year)

Amount of Each Receipt this Period

8/12/96

60.00

Receipt For: Primary General
 Other (specify):

Occupation
Operator
Aggregate Year-to-Date > \$ 460.00

G. Full Name, Mailing Address and ZIP Code
Madonna T. Baxter
4410 Fremont Street
Boise, ID 83706

Name of Employer
Boise Urban Stages

Date (month, day, year)

Amount of Each Receipt this Period

-0-

Receipt For: Primary General
 Other (specify):

Occupation
Operator
Aggregate Year-to-Date > \$ 205.00

GUBTOTAL of Receipts This Page (optional)

TOTAL This Period (see page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 2 OF 4
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Craig D. Whitehead 6346 Montgomery Road, #14 Cincinnati, OH 45213	SW Ohio Regional Transit Authority	8/26/96	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 255.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul R. Mathews 6404 Knights of Columbus North Little Rock, Ar 72118	Central Arkansas Trans.		-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence J. Hanley 40-D Dinsmore Street Staten Island, NY 10314	New York City Transit Authority		-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 900.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence Labrocco, 1701 85th Street Brooklyn, NY 11214	New York City Transit Authority	8/19/96	84.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 588.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Victor Suarez 300 Bard Avenue Staten Island, NY 10310	New York City Transit Authority	8/19/96	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 370.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David J. Toomey 144 Ocean Avenue North Middletown, NY 07748	New York City Transit Authority	8/19/96	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 370.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James W. Wilson 34 LaGuardia Avenue Staten Island, NY 10314	New York City Transit Authority	8/19/96	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 420.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 4
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in Full)

Amalgamated Transit Union COPE

A. Full Name, Mailing Address and ZIP Code Rita F. Jensen P.O. Box 53 Staten Island, NY 10309	Name of Employer New York City Transit Authority	Date (month, day, year) 8/19/96	Amount of Each Receipt this Period 60.00
	Occupation Operator	Aggregate Year-to-Date > \$ 525.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code Vincent Mecca 2 Delafield Place Staten Island, NY 10310	Name of Employer New York City Transit Authority	Date (month, day, year) 8/19/96	Amount of Each Receipt this Period 60.00
	Occupation Operator	Aggregate Year-to-Date > \$ 420.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code John C. Goldstein 3058 North Stowell Avenue Milwaukee, WI 53211	Name of Employer Milwaukee Transport Service, Inc.	Date (month, day, year)	Amount of Each Receipt this Period -0-
	Occupation Operator	Aggregate Year-to-Date > \$ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code Lloyd Perkins, Sr. 4171 North 20th Street Milwaukee, WI 53209	Name of Employer Milwaukee Transport Service, Inc.	Date (month, day, year)	Amount of Each Receipt this Period -0-
	Occupation Operator	Aggregate Year-to-Date > \$ 208.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code Richard T. Zaib 83-57 118th Street Kew Gardens, NY 11415	Name of Employer New York City Transit Authority	Date (month, day, year)	Amount of Each Receipt this Period -0-
	Occupation Operator	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code Holly Douglas 1015 Olive Street Indianapolis, IN 46203	Name of Employer Indianapolis Public Transportation Corp.	Date (month, day, year)	Amount of Each Receipt this Period -0-
	Occupation Operator	Aggregate Year-to-Date > \$ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code Charles L. Pettus 6737 Kincheloe Avenue Baltimore, MD 21207	Name of Employer Mass Transit Administration	Date (month, day, year)	Amount of Each Receipt this Period -0-
	Occupation Operator	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 4
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Theodore N. Closter 609 South Hayden Drive Escondido, CA 92027	San Diego Transit Corporation	8/26/96	32.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: Operator	Aggregate Year-to-Date > \$ 369.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerry L. Kleiboeker 5015 Comanche, #L La Mesa, CA 91941	San Diego Transit Corporation	8/26/96	44.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: Operator	Aggregate Year-to-Date > \$ 339.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ivey Glenn Smith 701 Alicia Court Garner, NC 27529	Tri-State Transit Authority - Retired		-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: Operator	Aggregate Year-to-Date > \$ 300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Eugene Owsley 1034 Bradford Place West Des Moines, IA 50266	Greyhound Lines, Inc. Retired		-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: Operator	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

586.96

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 22

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NAME OF COMMITTEE (In Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ATU New York Cope Account Staten Island Savings Bank 43 Richmond Hill Road Staten Island, NY 10314	Transfer of Funds Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	8/20/96	10,164.24
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

10,164.24

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 5
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Emily Firebaugh for Congress P.O. Box 676 Farrington, MO 6340-0676 MO	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	1,200.00
Rivers for Congress P.O. Box 8293 Ann Arbor, MI 48107 MI	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	500.00
Eva Clayton for Congress P.O. Box 2474 Washington, DC 20013 DC	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	500.00
Davis for Congress c/o Arent Fox Kintner Plotkin & Kahn 1050 Connecticut Avenue, NW Washington, DC 20036 DC	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	1,000.00
Bonior for Congress P.O. Box 75214 Washington, DC 20013-5214 DC	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	1,800.00
Weinberg for Congress P.O. Box 510 Sherryville, VA 22740 VA	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	2,000.00
Quinn for Congress 1212 North Vernon Street Arlington, VA 22201 VA	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	1,500.00
Bill Martini for Congress 1064 Princeton Avenue Cedar Grove, NJ 07009 NJ	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	1,500.00
Bob Ney for Congress 1212 North Vernon Street Arlington, VA 22201 VA	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	1,500.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 5
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Steve Rothman for Congress P.O. Box 714 Hackensack, NJ 07602	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	1,000.00
Costello for Congress P.O. Box 8250 Belleville, IL 62222	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	1,000.00
Bell for Congress Committee P.O. Box 31256 Augusta, GA 30903	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	500.00
Charlie Watts for Congress P.O. Box 980 Dallas, GA 30132	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	500.00
Jim Chafin for Congress P.O. Box 956 Mc Donough, GA 30253	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	500.00
Wiggins for Congress 90 Martin Luther King Blvd, #B-9 Macon, GA 31201	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	500.00
Friends of Ken Poston Committee P.O. Box 1996 Ringgold, GA 30736	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	500.00
Friends of Max Cleland for the US Senate Campaign Committee, Inc P.O. Box 7843 Atlanta, GA 30357	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	1,000.00
Diana DeGetta for Congress, Inc 770 Grant Street, Suite 218 Denver, CO 80203	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/8/96	500.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bob Ney for Congress 1212 North Vernon Street Arlington, VA 22201 VA	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/9/96	2,000.00
B. Full Name, Mailing Address and ZIP Code Victory '96 - Federal 510 North 3rd Street Harrisburg, PA 17101 PA	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	8/15/96	1,000.00
C. Full Name, Mailing Address and ZIP Code Paolino for Congress 489 Reservoir Avenue Cranston, RI 02910 RI	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/96	1,500.00
D. Full Name, Mailing Address and ZIP Code Bedford for Senate 2361 Fairlane Drive, Suite M320 Montgomery, AL 36116 AL	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/96	1,000.00
E. Full Name, Mailing Address and ZIP Code Friends of Frank Pallone 540 Broadway Long Branch, NJ 07740 NJ	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/96	500.00
F. Full Name, Mailing Address and ZIP Code Furse for Congress 1220 SW Morrison, #B10 Portland, OR 97205 OR	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/96	1,000.00
G. Full Name, Mailing Address and ZIP Code Maloney - Congress '96 301 Main Street Danbury, CT 06810 CT	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/96	500.00
H. Full Name, Mailing Address and ZIP Code Michaela Alioto for Congress 1333 Jefferson Street Napa, CA 94559 CA	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/96	500.00
I. Full Name, Mailing Address and ZIP Code Volunteers for Vento P.O. Box 65254 St. Paul, MN 55165 MN	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/96	1,000.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
McNulty for Congress Committee P.O. Box 1560 Green Island, NY 12183 NY	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/96	1,000.00
Navarro for Congress 3905 4th Avenue, #4 San Diego, CA 92103 CA	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/96	500.00
Friends of Lane Evans 121 Evans Street Rockville, MD 20850 IL	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/96	1,000.00
Bob Pilner for Congress P.O. Box 127868 San Diego, CA 92112 CA	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/96	1,000.00
Andrews for Congress Committee 26 Springdale Road, Bldg 27 Cherry Hill, NJ 01803 NJ	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/96	1,000.00
Mary Rieder for Congress Bear Creek P.O. Box 9250 Rochester, MN 55903 MN	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/96	500.00
Owens for Congress P.O. Box 8129 Scottsdale, AZ 85252 AZ	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/22/96	500.00
Keefe for Congress 788 Elm Street Manchester, NH 05254 NH	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/22/96	500.00
Ieyoub for Senate Committee, Inc P.O. Box 66901 Baton Rouge, LA 70896-6901 LA	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/22/96	500.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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PAGE 5 OF 5
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NAME OF COMMITTEE (in Full)

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Poland for Congress 6335 Prospect Dallas, TX 75214 TX	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/22/96	500.00
Charlie Jones for Congress c/o ATU Local Union 694 1901 North Flores Street San Antonio, TX 78212 TX	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/22/96	500.00
Spotswood for Congress P.O. Box 1096 Kenosha, WI 53141 WI	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/22/96	500.00
Soglin for Congress P.O. Box 1645 Madison, WI 53701 WI	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/22/96	500.00
Barrett for Congress 2711 North Avondale Blvd Milwaukee, WI 53210 WI	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/22/96	500.00
People for Gruszynski P.O. Box 896 Green Bay, WI 54305 WI	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/22/96	500.00
Quinn for Congress 1212 North Vernon Street Arlington, VA 22201 NY	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/9/96	3,500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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Federal Election Commission
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