

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
AMALGAMATED TRANSIT UNION-COPE

ADDRESS (number and street) 5025 WISCONSIN AVE. N.W.
 Check if different than previously reported. (ACC)
WASHINGTON DC 20016

2. **FEC IDENTIFICATION NUMBER** 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 Quarterly 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) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day Post -Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 09 01 2006 through 09 30 2006

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 Mr. Oscar Owens

Signature of Treasurer Electronically Filed by Mr. Oscar Owens Date 10 26 2006

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								
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
AMALGAMATED TRANSIT UNION-COPE

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		104302.24
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	128844.82									
(c) Total Receipts (from Line 19)	42545.09	367715.78								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	171389.91	472018.02								
7. Total Disbursements (from Line 31)	100294.90	400923.01								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	71095.01	71095.01								
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
AMALGAMATED TRANSIT UNION-COPE

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	1866.85	11656.90
(i) Itemized (use Schedule A)	40330.33	352664.09
(ii) Unitemized	42197.18	364320.99
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	42197.18	364320.99
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	500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	347.91	2894.79
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 Transfer (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))	42545.09	367715.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	42545.09	367715.78

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	91500.00	308800.00
24. Independent Expenditure (use Schedule E)	1043.25	1471.36
25. Coordinated Expenditures Made by Party Committees (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.....	7751.65	90651.65
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	100294.90	400923.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	100294.90	400923.01

DETAILED SUMMARY PAGE
of Disbursements

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	42197.18	364320.99
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42197.18	364320.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
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	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) Mr. Dale E. Anderson		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2006	
Mailing Address 2218 South 19th Street		Transaction ID: SA11A1.13466	
City State Zip Code Lacrosse WI 54601-6705	Amount of Each Receipt this Period 310.00		
FEC ID number of contributing federal political committee. C			
Name of Employer City of Lacrosse	Occupation Transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.00		

B. Full Name (Last, First, Middle Initial) Mr. Robert H. Baker		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2006	
Mailing Address 6400 Oakley Terrace		Transaction ID: SA11A1.13449	
City State Zip Code Frederick MD 21701	Amount of Each Receipt this Period 42.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Amalgamated Transit Union	Occupation International Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00		

C. Full Name (Last, First, Middle Initial) Ms Freda Braylock		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 56120 Quince Road		Transaction ID: SA11A1.13531	
City State Zip Code South Bend IN 46619-4400	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer South Bend Pub. Tran. Auth.	Occupation Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

SUBTOTAL of Receipts This Page (optional) ▶	382.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Garcell Bullock

Mailing Address 9132-8th Avenue

City Inglewood State CA Zip Code 90305

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

Name of Employer LA City Metro 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 / 2006

Transaction ID: SA11A1.13538

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr. Anthony R. Caldart

Mailing Address 901 Rolling Rock Road

City Pittsburgh State PA Zip Code 15234

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

Name of Employer Port Authority of Allegheny Co Occupation transit operator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 253.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 07 / 2006

Transaction ID: SA11A1.13456

Amount of Each Receipt this Period
1.00

C. Full Name (Last, First, Middle Initial)
Ms Cassandra Cobb

Mailing Address 3750 North 22nd Street
P.O. Box 340294

City Milwaukee State WI Zip Code 53206

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

Name of Employer Milwaukee Transport Services Occupation transit operator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.35

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2006

Transaction ID: SA11A1.13534

Amount of Each Receipt this Period
41.67

SUBTOTAL of Receipts This Page (optional)	▶	67.67
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Mr. Charles Cook		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2006	
Mailing Address P.O. Box 5322		Transaction ID: SA11A1.13448	
City Petaluma	State CA	Zip Code 94955	Amount of Each Receipt this Period 42.00
FEC ID number of contributing federal political committee. C			
Name of Employer Amalgamated Transit Union	Occupation International Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00		

Full Name (Last, First, Middle Initial) B. Ms Annie Edwards		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 2901 Bonds Avenue		Transaction ID: SA11A1.13533	
City South Bend	State IN	Zip Code 46628	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer South Bend Public Transit Corp	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) C. Mr. Stephen S. Farrell		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 150 Ocean Avenue		Transaction ID: SA11A1.13524	
City Cranston	State RI	Zip Code 02905	Amount of Each Receipt this Period 2.50
FEC ID number of contributing federal political committee. C			
Name of Employer Rhode Island Public Transit Au	Occupation Transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.00		

SUBTOTAL of Receipts This Page (optional) ▶	74.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Mr. James D. Fitzgerald		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2006	
Mailing Address 4608 East 13th Avenue		Transaction ID: SA11A1.13535	
City State Zip Code Spokane Valley WA 99212	Amount of Each Receipt this Period 41.67		
FEC ID number of contributing federal political committee. C			
Name of Employer Spokane Transit Authority	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 292.35		

Full Name (Last, First, Middle Initial) B. Ms Mary B. Fitzgerald		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2006	
Mailing Address 4608 E. 13th Avenue		Transaction ID: SA11A1.13537	
City State Zip Code Spokane Valley WA 99212-6360	Amount of Each Receipt this Period 46.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Spokane Transit Authority	Occupation transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 406.00		

Full Name (Last, First, Middle Initial) C. Ms Karen M. Foulks		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 57121 Guernsey		Transaction ID: SA11A1.13532	
City State Zip Code Osceola IN 46561	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer South Bend Public Transit Corp	Occupation Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

SUBTOTAL of Receipts This Page (optional) ▶	117.67
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Mr. John Franchino		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006
Mailing Address 8751 Stanwell Street		Transaction ID: SA11A1.13540
City State Zip Code San Diego CA 92126-3211	Amount of Each Receipt this Period 26.00	
FEC ID number of contributing federal political committee. C		
Name of Employer ATC Vancorn Inc. of California	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

Full Name (Last, First, Middle Initial) B. Mr. James R. Gardner		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006
Mailing Address 2080 Bridge Creek Circle		Transaction ID: SA11A1.13458
City State Zip Code Tracy CA 96377	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Alameda Contra-Costa Transit D	Occupation transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) C. Joseph D. Gaudette		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2006
Mailing Address 67 Old Thompson Road		Transaction ID: SA11A1.13528
City State Zip Code Buxton ME 04093	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Greater Portland Transit Dist.	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	106.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Mr. Joseph H. Gotcher

Mailing Address 918 La Presa Avenue

City State Zip Code
Spring Valley CA 91977-4341

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

Name of Employer
ATC Vancorn Inc. of California

Occupation
Transit Operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2006

Transaction ID: SA11A1.13541

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Steven M. Green

Mailing Address 207 Washington Avenue

City State Zip Code
Rensselaer NY 12144

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

Name of Employer
Capital District Transit Dist

Occupation
transit operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2006

Transaction ID: SA11A1.13542

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Mr Lawrence Hanley

Mailing Address 40-D Dinsmore Street

City State Zip Code
Staten Island NY 10314

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

Name of Employer
Amalgamated Transit Union

Occupation
International Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2006

Transaction ID: SA11A1.13453

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional)	▶	207.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Mr. Donald T. Hansen

Mailing Address 12016 Bronson Street, SE

City State Zip Code
Tenino WA 98589

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

Name of Employer Occupation
Amalgamated Transit Union International Vice President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 336.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2006

Transaction ID: SA11A1.13446

Amount of Each Receipt this Period
42.00

B. Full Name (Last, First, Middle Initial)
Ronald J. Heintzman

Mailing Address 12126 Meridian Road, NE

City State Zip Code
Mt. Angel OR 97362

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

Name of Employer Occupation
Amalgamated Transit Union International Vice President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2006

Transaction ID: SA11A1.13452

Amount of Each Receipt this Period
45.00

C. Full Name (Last, First, Middle Initial)
Ms Rebecca Jones-White

Mailing Address 5738 Holway Court

City State Zip Code
Oakland CA 94621

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

Name of Employer Occupation
Alameda Contra Costa Trans. Transit employee

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2006

Transaction ID: SA11A1.13461

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)	▶	137.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Kenneth R. Kirk

Mailing Address 1236 Spring Water Drive

City State Zip Code
Lancaster TX 75134

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

Name of Employer
Amalgamated Transit Union

Occupation
International Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2006

Transaction ID: SA11A1.13454

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Ralph T. Klugh

Mailing Address 3418 Cedar Glen Drive

City State Zip Code
Allison Park PA 15101

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

Name of Employer
Port Athority of Alleghe-ny

Occupation
transit operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2006

Transaction ID: SA11A1.13457

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
Mr. William G. Mc Lean

Mailing Address 2350 Greensboro Drive

City State Zip Code
Reno NV 89509

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 ▼
666.72

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2006

Transaction ID: SA11A1.13451

Amount of Each Receipt this Period
83.34

SUBTOTAL of Receipts This Page (optional)	▶	168.34
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Mr. Tommy N. Mullins		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2006
Mailing Address 5240 Dresden Lane		Transaction ID: SA11A1.13444
City State Zip Code Roanoke VA 24012	Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Amalgamated Transit Union	Occupation International Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

Full Name (Last, First, Middle Initial) B. Mr. Richard M. Murphy		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2006
Mailing Address 346 Washington Street #143		Transaction ID: SA11A1.13450
City State Zip Code Braintree MA 02184	Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Amalgamated Transit Union	Occupation International Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

Full Name (Last, First, Middle Initial) C. Mr. Paul B. Neil		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address 8014 NE 121st		Transaction ID: SA11A1.13906
City State Zip Code Kirkland WA 98034	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County Metro Transit	Occupation Transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.86	

SUBTOTAL of Receipts This Page (optional) ▶	109.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Mr. Lance F. Norton		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 3529 158th SW		Transaction ID: SA11A1.13472	
City Lynwood	State WA	Zip Code 98037-1415	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer King County Metro Transit	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. Ms Brenda Pernell		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 20 Calhoun Street		Transaction ID: SA11A1.13459	
City Vallejo	State CA	Zip Code 94590	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Alameda-Contra Costa Trans Di	Occupation transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) C. Mr. Larry Pradier		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2006	
Mailing Address 5733 Bonfair Avenue		Transaction ID: SA11A1.13539	
City Lakewood	State CA	Zip Code 90712	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Transportation Concepts Hemet	Occupation Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	75.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Mr. Rodney Richmond		Date of Receipt M M / D D / Y Y Y Y Y 09 / 07 / 2006	
Mailing Address 4303 Pine Lane		Transaction ID: SA11A1.13445	
City State Zip Code Spring TX 77389-4642	Amount of Each Receipt this Period 42.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Amalgamated Transit Union	Occupation International Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00		

Full Name (Last, First, Middle Initial) B. Daniel G. Rodriguez, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 09 / 14 / 2006	
Mailing Address 209 Ray Avenue		Transaction ID: SA11A1.13526	
City State Zip Code San Antonio TX 78204	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer VIA Metro Transit Authority	Occupation transit opertor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Mr. Joseph Rovito		Date of Receipt M M / D D / Y Y Y Y Y 09 / 05 / 2006	
Mailing Address 1525 34th Street		Transaction ID: SA11A1.13465	
City State Zip Code Sacramento CA 95816-6525	Amount of Each Receipt this Period 42.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Sacramento Reg. Transit Dist.	Occupation operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00		

SUBTOTAL of Receipts This Page (optional) ▶	124.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Mr. Robert L. Scott		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006	
Mailing Address 2509 Rachel Court		Transaction ID: SA11A1.13460	
City State Zip Code Antioch CA 94509	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Alameda-Contra Costa Transit D	Occupation Transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

Full Name (Last, First, Middle Initial) B. Ms Karen S. Simmons		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2006	
Mailing Address 12901 Nimes Drive		Transaction ID: SA11A1.13447	
City State Zip Code Crebe Coeur MO 63141	Amount of Each Receipt this Period 41.67		
FEC ID number of contributing federal political committee. C			
Name of Employer Amalgamated Transit Union	Occupation International Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36		

Full Name (Last, First, Middle Initial) C. Rhodessa O. Stringer		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006	
Mailing Address 831 34th Street		Transaction ID: SA11A1.13464	
City State Zip Code Oakland CA 94608	Amount of Each Receipt this Period 46.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Alameda-Contra Costa Transit	Occupation transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 332.00		

SUBTOTAL of Receipts This Page (optional) ▶	127.67
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Mr. Mark P. Tambellini

Mailing Address 943 Fairfield Lane

City State Zip Code
McDonald PA 15057

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

Name of Employer Occupation
PAT Transit Allegheny Co. transit employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2006

Transaction ID: SA11A1.13455

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Del L. Walker

Mailing Address P.O. Box 30572

City State Zip Code
Bellingham WA 98228

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

Name of Employer Occupation
Whatcom Transit Authority transit operator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2006

Transaction ID: SA11A1.13529

Amount of Each Receipt this Period
24.00

C. Full Name (Last, First, Middle Initial)
Mr. Craig D. Whitehead

Mailing Address 1803 Andina Avenue #14

City State Zip Code
Cincinnati OH 45237

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

Name of Employer Occupation
SW Ohio Regional Transit Ath Transit Operator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2006

Transaction ID: SA11A1.13525

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **84.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 44
	(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

A. Full Name (Last, First, Middle Initial)
Ms Yvonne M. Williams

Mailing Address 2475 60th Avenue

City State Zip Code
Oakland CA 94605

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

Name of Employer
Alameda-Contra Costa Trans Dis

Occupation
transit operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	6

Transaction ID: SA11A1.13462

Amount of Each Receipt this Period
45.00

B. Full Name (Last, First, Middle Initial)
Mr. Anthony R. Withington

Mailing Address 5817 Blank Road

City State Zip Code
Sebastopol CA 95472-6115

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

Name of Employer
Golden Gate Bridge Hwy Tr. Dist.

Occupation
Transit Operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.13544

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional)	▶	87.00
TOTAL This Period (last page this line number only)	▶	1866.85

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 20 / 44	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
 Citibank, F.S.B.

Mailing Address 5001 Wisconsin Avenue, N.W.

City State Zip Code
 Washington DC 20016

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2894.79

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2006

Transaction ID: SA17.13591

Amount of Each Receipt this Period
 347.91

SUBTOTAL of Receipts This Page (optional)	▶	347.91
TOTAL This Period (last page this line number only)	▶	347.91

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 21 / 44

<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. AKAKA IN 2006		Transaction ID: SB23.13405 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address C/O 904 NANA HONUA STREET		Amount of Each Disbursement this Period 3000.00
City HONOLULU State HI Zip Code 96825		
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. ANNA ESHOO FOR CONGRESS		Transaction ID: SB23.13369 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 555 CAPITOL MALL SUITE 1425		Amount of Each Disbursement this Period 1000.00
City SACRAMENTO State CA Zip Code 95814		
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 14	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. ARCURI FOR CONGRESS		Transaction ID: SB23.13387 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 8508		Amount of Each Disbursement this Period 1000.00
City Utica State NY Zip Code 13505		
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 44

<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. BECERRA FOR CONGRESS		Transaction ID: SB23.13412 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 261060		Amount of Each Disbursement this Period 1000.00
City LOS ANGELES	State CA Zip Code 90026	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 30		

Full Name (Last, First, Middle Initial) B. BEN CARDIN FOR SENATE		Transaction ID: SB23.13402 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. BOX 21093		Amount of Each Disbursement this Period 5000.00
City CATONSVILLE	State MD Zip Code 21228	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD District: 03		

Full Name (Last, First, Middle Initial) C. BRALEY FOR CONGRESS		Transaction ID: SB23.13420 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 2500.00
City Waterloo	State IA Zip Code 50704	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 01		

SUBTOTAL of Disbursements This Page (optional) ▶	8500.00
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)

PAGE 23 / 44

<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. CARNEY FOR CONGRESS		Transaction ID: SB23.13390 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 38		Amount of Each Disbursement this Period 1000.00
City Dimock State PA Zip Code 18816	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. CHAD KLUKO FOR CONGRESS COMMITTEE		Transaction ID: SB23.13421 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address PO BOX 1510		Amount of Each Disbursement this Period 500.00
City MONROEVILLE State PA Zip Code 15146	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. CITIZENS FOR ALTMIRE		Transaction ID: SB23.13423 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address PO BOX 1776		Amount of Each Disbursement this Period 1000.00
City FREEDOM State PA Zip Code 15042	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
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)

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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. COMMITTEE TO BRING BACK BARON		Transaction ID: SB23.13378
Mailing Address PO BOX 1071		Date of Disbursement 09 / 19 / 2006
City SEYMOUR	State IN	Zip Code 47274
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN	District: 09	

Full Name (Last, First, Middle Initial) B. COMMITTEE TO ELECT CHRIS MURPHY		Transaction ID: SB23.13382
Mailing Address P.O. Box 127		Date of Disbursement 09 / 19 / 2006
City Cheshire	State CT	Zip Code 06410
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT	District: 05	

Full Name (Last, First, Middle Initial) C. CRANLEY FOR CONGRESS		Transaction ID: SB23.13373
Mailing Address 37 W 7TH ST SUITE 804		Date of Disbursement 09 / 19 / 2006
City CINCINNATI	State OH	Zip Code 45202
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 01	

SUBTOTAL of Disbursements This Page (optional)	3000.00
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)

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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. DARCY BURNER FOR CONGRESS		Transaction ID: SB23.13371
Mailing Address PO BOX 1090		Date of Disbursement MM / DD / YYYY 09 / 19 / 2006
City CARNATION	State WA	Zip Code 98014
Purpose of Disbursement		Amount of Each Disbursement this Period 4000.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA	District: 08	

Full Name (Last, First, Middle Initial) B. DAVE WU FOR CONGRESS		Transaction ID: SB23.13419
Mailing Address 818 SW 3RD ST #1182		Date of Disbursement MM / DD / YYYY 09 / 12 / 2006
City PORTLAND	State OR	Zip Code 97205
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OR	District: 01	

Full Name (Last, First, Middle Initial) C. DAVID SCOTT FOR CONGRESS		Transaction ID: SB23.13360
Mailing Address 162 HURT STREET NE		Date of Disbursement MM / DD / YYYY 09 / 19 / 2006
City ATLANTA	State GA	Zip Code 30307
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA	District: 13	

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)

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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 SENATORIAL CAMPAIGN COMMITTEE		Transaction ID: SB23.13352 Date of Disbursement
Mailing Address 430 SOUTH CAPITOL STREET, SE		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement	<input type="text"/>	Amount of Each Disbursement this Period
Candidate Name	Category/Type	<input type="text" value="5000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Other	

Full Name (Last, First, Middle Initial) B. DONNELLY FOR CONGRESS COMMITTEE		Transaction ID: SB23.13392 Date of Disbursement
Mailing Address 215 SOUTH ST JOSEPH ST STE 600 CENTURY BUILDING		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City SOUTH BEND	State IN	Zip Code 46601
Purpose of Disbursement	<input type="text"/>	Amount of Each Disbursement this Period
Candidate Name	Category/Type	<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 02		

Full Name (Last, First, Middle Initial) C. EDDIE BERNICE JOHNSON FOR CONGRESS		Transaction ID: SB23.13361 Date of Disbursement
Mailing Address 2501 CEDAR SPRINGS AVE SUITE 160		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement	<input type="text"/>	Amount of Each Disbursement this Period
Candidate Name	Category/Type	<input type="text" value="500.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX District: 30		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

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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. ELLISON FOR CONGRESS		Transaction ID: SB23.13356 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 11818		Amount of Each Disbursement this Period 1000.00
City MINNEAPOLIS State MN Zip Code 55411		
Purpose of Disbursement Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. ELLSWORTH FOR CONGRESS COMMITTEE		Transaction ID: SB23.13374 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 62		Amount of Each Disbursement this Period 1000.00
City EVANSVILLE State IN Zip Code 47708		
Purpose of Disbursement Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. FEINSTEIN FOR SENATE		Transaction ID: SB23.13404 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 601 S. GLENOAKS BLVD., SUITE 208		Amount of Each Disbursement this Period 1500.00
City BURBANK State CA Zip Code 91502		
Purpose of Disbursement Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
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)

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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. FRIENDS OF CONGRESSMAN TIM HOLDEN		Transaction ID: SB23.13362
Mailing Address P.O. BOX 37		Date of Disbursement 09 / 19 / 2006
City ST. CLAIR	State PA	Zip Code 17970
Purpose of Disbursement	Amount of Each Disbursement this Period 1000.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 06		

Full Name (Last, First, Middle Initial) B. FRIENDS OF SHERROD BROWN		Transaction ID: SB23.13407
Mailing Address 607 14TH STREET NW SUITE 800		Date of Disbursement 09 / 19 / 2006
City WASHINGTON	State DC	Zip Code 20005
Purpose of Disbursement	Amount of Each Disbursement this Period 2500.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 13		

Full Name (Last, First, Middle Initial) C. GILLIBRAND FOR CONGRESS		Transaction ID: SB23.13351
Mailing Address P.O. Box 1279		Date of Disbursement 09 / 05 / 2006
City Hudson	State NY	Zip Code 12534
Purpose of Disbursement	Amount of Each Disbursement this Period 2500.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 20		

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)

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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. GRANT FOR CONGRESS		Transaction ID: SB23.13365 Date of Disbursement
Mailing Address P O BOX 489		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City FRUITLAND	State ID ID	Zip Code 83619
Purpose of Disbursement	<input type="text" value="500.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ID	District: 01	

Full Name (Last, First, Middle Initial) B. HAFEN FOR CONGRESS		Transaction ID: SB23.13376 Date of Disbursement
Mailing Address PO BOX 530996		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City HENDERSON	State ID NV	Zip Code 89053
Purpose of Disbursement	<input type="text" value="1000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV	District: 03	

Full Name (Last, First, Middle Initial) C. HEATH SHULER FOR CONGRESS		Transaction ID: SB23.13384 Date of Disbursement
Mailing Address PO BOX 97		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City HAZELWOOD	State ID NC	Zip Code 28738
Purpose of Disbursement	<input type="text" value="1000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 11	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

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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. Hooley for Congress		Transaction ID: SB23.13418 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address PO BOX 2050		Amount of Each Disbursement this Period 1000.00
City SALEM State OR Zip Code 97308	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JAMES WEBB FOR US SENATE		Transaction ID: SB23.13410 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 1916 WILSON BOULEVARD, SUITE 304		Amount of Each Disbursement this Period 2500.00
City ARLINGTON State VA Zip Code 22201	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. JERRY WELLER FOR CONGRESS INC		Transaction ID: SB23.13400 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 15283		Amount of Each Disbursement this Period 1000.00
City WASHINGTON State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. KAGEN 4 CONGRESS		Transaction ID: SB23.13416 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 100 WEST LAWRENCE STREET		Amount of Each Disbursement this Period 5000.00
City APPLETON State WI Zip Code 54911		
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. KELLAM FOR CONGRESS		Transaction ID: SB23.13393 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2384 PRINCESS ANNE RD PO BOX 56254		Amount of Each Disbursement this Period 1000.00
City VIRGINIA BEACH State VA Zip Code 23456		
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. KILROY FOR CONGRESS		Transaction ID: SB23.13379 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 929 Harrison Ave Ste 305		Amount of Each Disbursement this Period 1000.00
City Columbus State OH Zip Code 43215		
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
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)

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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. KLEIN FOR CONGRESS		Transaction ID: SB23.13381
Mailing Address 21301 POWERLINE ROAD SUITE 204		Date of Disbursement 09 / 19 / 2006
City BOCA RATON	State FL	Zip Code 33433
Purpose of Disbursement	Amount of Each Disbursement this Period 2000.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 22		

Full Name (Last, First, Middle Initial) B. KLOBUCHAR FOR MINNESOTA		Transaction ID: SB23.13353
Mailing Address PO BOX 4146 PO BOX 4146		Date of Disbursement 09 / 19 / 2006
City ST PAUL	State MN	Zip Code 55104
Purpose of Disbursement	Amount of Each Disbursement this Period 5000.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 00		

Full Name (Last, First, Middle Initial) C. LOFGREN FOR CONGRESS		Transaction ID: SB23.13367
Mailing Address 111 W ST JOHN STREET SUITE 400		Date of Disbursement 09 / 19 / 2006
City SAN JOSE	State CA	Zip Code 95113
Purpose of Disbursement	Amount of Each Disbursement this Period 1000.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 16		

SUBTOTAL of Disbursements This Page (optional)	8000.00
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)

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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. MCCASKILL FOR MISSOURI		Transaction ID: SB23.13363 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 6771		Amount of Each Disbursement this Period 5000.00
City ST LOUIS State MO Zip Code 63144	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. MCCOLLUM FOR CONGRESS		Transaction ID: SB23.13359 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2464 BURKE AVE E		Amount of Each Disbursement this Period 1000.00
City NORTH ST PAUL State MN Zip Code 55109	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. MIKE HONDA FOR CONGRESS		Transaction ID: SB23.13368 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 111 W ST JOHN STREET SUITE 400		Amount of Each Disbursement this Period 1000.00
City SAN JOSE State CA Zip Code 95113	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 15	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
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)

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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

A. PATRICK MURPHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 868

City LEVITTOWN State PA Zip Code 19058

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: PA District: 08

Transaction ID: SB23.13394

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

1000.00

B. PATTY WETTERLING FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1334

City ST CLOUD State MN Zip Code 56302

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: MN District: 06

Transaction ID: SB23.13398

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

5000.00

C. PERLMUTTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 3440 Youngfield St #264

City Wheat Ridge State CO Zip Code 80033

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CO District: 07

Transaction ID: SB23.13389

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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)

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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. PETERSON FOR CONGRESS		Transaction ID: SB23.13358 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 26192 Floyd Lake Point Road		Amount of Each Disbursement this Period 1000.00
City Detroit Lakes State MN Zip Code 56501	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 07	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. ROTH FOR CONGRESS		Transaction ID: SB23.13414 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 1107		Amount of Each Disbursement this Period 1000.00
City La Quinta State CA Zip Code 92247	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 45	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. SANDERS FOR SENATE		Transaction ID: SB23.13408 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 2500.00
City BURLINGTON State VT Zip Code 05402	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
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)

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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. SCHIFF FOR CONGRESS		Transaction ID: SB23.13413 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 555 CAPITOL MALL SUITE 1425		Amount of Each Disbursement this Period 500.00
City SACRAMENTO State CA Zip Code 95814		
Purpose of Disbursement <input type="text"/>		
Candidate Name <input type="text"/> Category/Type <input type="text"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. SESTAK FOR CONGRESS		Transaction ID: SB23.13396 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 1000.00
City Media State PA Zip Code 19063		
Purpose of Disbursement <input type="text"/>		
Candidate Name <input type="text"/> Category/Type <input type="text"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. SIMMONS FOR CONGRESS		Transaction ID: SB23.13370 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 268 Drawer 271 P.O. Box 268 Drawer 271		Amount of Each Disbursement this Period 1000.00
City Stonington State CT Zip Code 06378		
Purpose of Disbursement <input type="text"/>		
Candidate Name <input type="text"/> Category/Type <input type="text"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

**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)

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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. STABENOW FOR US SENATE		Transaction ID: SB23.13406 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO BOX 4945		Amount of Each Disbursement this Period 5000.00	
City EAST LANSING	State MI		Zip Code 48826
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MI District: 00			

Full Name (Last, First, Middle Initial) B. WELCH FOR CONGRESS		Transaction ID: SB23.13385 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO Box 1086		Amount of Each Disbursement this Period 1000.00	
City Montpelier	State VT		Zip Code 05601
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: VT District: 00			

SUBTOTAL of Disbursements This Page (optional) ►

6000.00

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

91500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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. ATU Local 1576		Transaction ID: SB29.13442 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address 2810 Lombard Avenue Suite 203		Amount of Each Disbursement this Period 1101.65
City Lynwood State WA Zip Code 98201-3695	Purpose of Disbursement Non federal contribution - refund Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Brady for Idaho		Transaction ID: SB29.13431 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 2616		Amount of Each Disbursement this Period 250.00
City Boise State ID Zip Code 83701-2616	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Campaign for Jane McMackin		Transaction ID: SB29.13435 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 35 32nd Avenue		Amount of Each Disbursement this Period 200.00
City Isle of Palms State SC Zip Code 29451	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1551.65
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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. DeLuca for Legislator Committee		Transaction ID: SB29.13441 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address 1438 Homestead Road		Amount of Each Disbursement this Period 1000.00
City Verona State PA Zip Code 15147	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Democrats Who Have Had Enough		Transaction ID: SB29.13437 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address P.O. Box 9100		Amount of Each Disbursement this Period 3500.00
City Seattle State WA Zip Code 98109	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Elect Bill Kortz Committee		Transaction ID: SB29.13428 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 514 Ridgeview Drive		Amount of Each Disbursement this Period 250.00
City Dravosburg State PA Zip Code 15034	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	4750.00
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)

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<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. Elect Tom Tangretti Committee		Transaction ID: SB29.13430 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 292		Amount of Each Disbursement this Period 300.00
City Greensburg State PA Zip Code 15601	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Friends for Forlo		Transaction ID: SB29.13440 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address 3629 Butler Street		Amount of Each Disbursement this Period 150.00
City Pittsburgh State PA Zip Code 15201	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Friends of Frank Dermody		Transaction ID: SB29.13439 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address P.O. Box 274		Amount of Each Disbursement this Period 500.00
City Tarentum State PA Zip Code 15084	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	950.00
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)

PAGE 41 / 44

<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 George Leventhal		Transaction ID: SB29.13426 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 724		Amount of Each Disbursement this Period 250.00
City Silver Spring State MD Zip Code 20918	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Twilegar for Controller		Transaction ID: SB29.13433 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 9559		Amount of Each Disbursement this Period 250.00
City Boise State ID Zip Code 83707-9559	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

500.00

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

7751.65

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Killeen Printing Company, Inc.			Nature of Debt (Purpose):
Mailing Address 537 East Carson Street			
City Pittsburgh	State PA	ZIP Code 15203	

Outstanding Balance Beginning This Period		Transaction ID: SD10.13602	
1043.25			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	1043.25	0.00	

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	0.00
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) AMALGAMATED TRANSIT UNION-COPE		FEC IDENTIFICATION NUMBER C C00032995	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		Date M M / D D / Y Y Y Y 09 / 23 / 2006	
Full Name (Last, First, Middle, Initial) of Payee Killeen Pringting Company, Inc.		Amount 1043.25	
Mailing Address 537 East Carson Street		Transaction ID: SE24.13607	
City Pittsburgh	State PA	Zip Code 15203	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential
Purpose of Expenditure Campaign materials		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: BOB Bob CASEY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2006 <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		1471.36	

(a) SUBTOTAL of Itemized Independent Expenditures	1043.25
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	1043.25
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Mr. Oscar Owens Signature	Date M M / D D / Y Y Y Y 10 / 26 / 2006

Image# 26960638141

Form/Schedule: **F3XA**

Transaction ID:

The unitemized total of \$40,330.33 represents the total contributions received from individuals who have not individually contributed more than \$200 in the aggregate during the calendar year. 10/26/06 -- When originally filed, certain individual contributions totaling \$1,628.69 were reported as itemized contributions. However, these contributions were outside of the reporting period. The individuals have been deleted and the unitemized amount has been increased by \$1,628.69, showing a corrected unitemized total of \$40,330.33 instead of the incorrect amount of \$38,701.64.

Form/Schedule: **SB29**

Transaction ID: **SB29.13442**

This disbursement is a refund of union dues and initiation fees that were submitted as voluntary contributions to the ATU-COPE Voluntary Account. The check was deposited on August 30, 2006, in error. Of the \$1,101.65 deposited, no person's total amount was more than \$200.
