

# 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  
UTILITY WORKERS UNION OF AMERICA COPE

ADDRESS (number and street) 815 16TH ST. NW  
 Check if different than previously reported. (ACC)  
WASHINGTON DC 20006

2. **FEC IDENTIFICATION NUMBER** C00040741  
**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 11 01 2009 through 11 30 2009

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 GARY RUFFNER

Signature of Treasurer Electronically Filed by GARY RUFFNER Date 12 15 2009

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

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

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
UTILITY WORKERS UNION OF AMERICA COPE

Report Covering the Period: From: 

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		82187.05
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	98551.84									
(c) Total Receipts (from Line 19) .....	4128.50	65426.29								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	102680.34	147613.34								
7. Total Disbursements (from Line 31) .....	7005.04	51938.04								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	95675.30	95675.30								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
UTILITY WORKERS UNION OF AMERICA COPE

Report Covering the Period: From: 

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	1955.41	17256.26
(ii) Unitemized .....	2173.09	48170.03
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	4128.50	65426.29
(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) .....	4128.50	65426.29
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total 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)) .....	4128.50	65426.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4128.50	65426.29

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	5.04	129.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	5.04	129.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	40000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
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.....	0.00	11808.95
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))..	7005.04	51938.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7005.04	51938.04

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	4128.50	65426.29
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4128.50	65426.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5.04	129.09
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5.04	129.09

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 15  
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.**

Full Name (Last, First, Middle Initial)  
JEFFREY BAKKER

Mailing Address PO BOX 642

City CHARLEROIX State MI Zip Code 49720

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

Name of Employer UTILITY WORKERS UNION OF AMERICA Occupation NATIONAL REPRESENTATIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 30 / 2009

Transaction ID: SA11AI.7386

Amount of Each Receipt this Period 40.00

PAYROLL DEDUCTION 20.00 PER PERIOD

**B.**

Full Name (Last, First, Middle Initial)  
ROBERT CHET

Mailing Address 3700 EDGEWOOD DRIVE

City LORAIN State OH Zip Code 44053

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

Name of Employer UTILITY WORKERS UNION OF AMERICA Occupation EXECUTIVE BOARD MEMBER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1133.44

Date of Receipt 11 / 30 / 2009

Transaction ID: SA11AI.7387

Amount of Each Receipt this Period 103.04

PAYROLL DEDUCTION 51.52 PER PERIOD

**C.**

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

Mailing Address 2508 PHEASANT HOLLOW DR

City PLAINSBORO State NJ Zip Code 08536

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 30 / 2009

Transaction ID: SA11AI.7401

Amount of Each Receipt this Period 50.00

EX BOARD MONTHLY CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 193.04

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

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

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) KELLY J. COOPER	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 520 MCNEILAN ROAD	<b>Transaction ID:</b> SA11AI.7384
	City State Zip Code WEST UNION OH 45693	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	EX BOARD MONTHLY CONTRIBUTION
Name of Employer UTILITY WORKERS UNION OF AMER	Occupation DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JOHN DEVLIN	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 37 BRILL LANE	<b>Transaction ID:</b> SA11AI.7388
	City State Zip Code POUGHQUAG NY 12570	Amount of Each Receipt this Period 103.04
	FEC ID number of contributing federal political committee. <b>C</b>	PAYROLL DEDUCTION 51.52 PER PERIOD
Name of Employer UTILITY WORKERS UNION OF AMERICA	Occupation NATIONAL REP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1133.44	

<b>C.</b>	Full Name (Last, First, Middle Initial) JOHN DUFFY	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 286 HOWARD ST	<b>Transaction ID:</b> SA11AI.7389
	City State Zip Code WASHINGTON TOWNSHI NJ 07676	Amount of Each Receipt this Period 157.87
	FEC ID number of contributing federal political committee. <b>C</b>	PAYROLL DEDUCTION
Name of Employer UTILITY WORKERS UNION OF AMERI	Occupation OFFICIER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1588.10	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>310.91</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 15  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>SHAWN GARVEY</b></p> <p>Mailing Address <b>16 GRAND AVENUE</b></p> <p>City <b>LYNBROOK</b> State <b>NY</b> Zip Code <b>11563</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer _____ Occupation _____</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">550.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p><b>Transaction ID: SA11AI.7402</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">50.00</span> </p> <p><b>EX BOARD MONTHLY CONTRIBUTION</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	3	0	/	2	0	0	9												

<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>JAMES GENNETT</b></p> <p>Mailing Address <b>319 DIANA COURT</b></p> <p>City <b>BENSONVILLE</b> State <b>IL</b> Zip Code <b>60106</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer <b>UTILITY WORKERS UNION OF AMERICA, AFL-</b> Occupation <b>EXECUTIVE BOARD MEMBER</b></p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">550.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p><b>Transaction ID: SA11AI.7403</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">50.00</span> </p> <p><b>EX BOARD MONTHLY CONTRIBUTION</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	3	0	/	2	0	0	9												

<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>JAMES HARRISON</b></p> <p>Mailing Address <b>3539 ARMOUR</b></p> <p>City <b>PORT HURON</b> State <b>MI</b> Zip Code <b>48060</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer <b>UTILITY WORKERS UNION OF AMERI</b> Occupation <b>EXECUTIVE BOARD MEMBER</b></p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">2255.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p><b>Transaction ID: SA11AI.7405</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">205.00</span> </p> <p><b>EX BOARD MONTHLY CONTRIBUTION</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	3	0	/	2	0	0	9												

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">305.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 15  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>JOHN HOLLAND</b></p> <p>Mailing Address <b>8 WALNUT STREET</b></p> <p>City <b>FOXBORO</b> State <b>MA</b> Zip Code <b>02035</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;"><b>C</b></span></p> <p>Name of Employer <b>UTILITY WORKERS UNION OF AMERICA</b> Occupation <b>REGIONAL DIRECTOR</b></p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;"><b>1247.84</b></span></p>	<p>Date of Receipt  <table border="1" style="border-collapse: collapse; width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y Y</td> </tr> <tr> <td style="text-align: center;"><b>1 1 / 3 0 / 2 0 0 9</b></td> </tr> </table> </p> <p><b>Transaction ID: SA11AI.7390</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;"><b>113.44</b></span> </p> <p><b>PAYROLL DEDUCTION 56.72 PER PERIOD</b></p>	M M / D D / Y Y Y Y Y	<b>1 1 / 3 0 / 2 0 0 9</b>
M M / D D / Y Y Y Y Y			
<b>1 1 / 3 0 / 2 0 0 9</b>			

<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>ROBERT HOUSER</b></p> <p>Mailing Address <b>42 RAVENWOOD BLVD</b></p> <p>City <b>BARNEGAT</b> State <b>NJ</b> Zip Code <b>08005</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;"><b>C</b></span></p> <p>Name of Employer <b>UTILITY WORKERS UNION OF AMERICA</b> Occupation <b>NATIONAL ORGANIZER</b></p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;"><b>1133.44</b></span></p>	<p>Date of Receipt  <table border="1" style="border-collapse: collapse; width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y Y</td> </tr> <tr> <td style="text-align: center;"><b>1 1 / 3 0 / 2 0 0 9</b></td> </tr> </table> </p> <p><b>Transaction ID: SA11AI.7391</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;"><b>103.04</b></span> </p> <p><b>PAYROLL DEDUCTION 51.52 PER PERIOD</b></p>	M M / D D / Y Y Y Y Y	<b>1 1 / 3 0 / 2 0 0 9</b>
M M / D D / Y Y Y Y Y			
<b>1 1 / 3 0 / 2 0 0 9</b>			

<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>DANIEL HURLEY</b></p> <p>Mailing Address <b>101 ARBUTUS AVENUE</b></p> <p>City <b>BRAINTREE</b> State <b>MA</b> Zip Code <b>02184</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;"><b>C</b></span></p> <p>Name of Employer <b>UTILITY WORKERS UNION OF AMERICA</b> Occupation <b>EXECUTIVE BOARD MEMBER</b></p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;"><b>275.00</b></span></p>	<p>Date of Receipt  <table border="1" style="border-collapse: collapse; width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y Y</td> </tr> <tr> <td style="text-align: center;"><b>1 1 / 3 0 / 2 0 0 9</b></td> </tr> </table> </p> <p><b>Transaction ID: SA11AI.7406</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;"><b>25.00</b></span> </p> <p><b>EX BOARD MONTHLY CONTRIBUTION</b></p>	M M / D D / Y Y Y Y Y	<b>1 1 / 3 0 / 2 0 0 9</b>
M M / D D / Y Y Y Y Y			
<b>1 1 / 3 0 / 2 0 0 9</b>			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;"><b>241.48</b></span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px; display: block; height: 20px;"></span>

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

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) LARRY KELLEY	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 270 MANSFIELD RD	<b>Transaction ID:</b> SA11AI.7392
	City State Zip Code WASHINGTON PA 15301	Amount of Each Receipt this Period 68.90
	FEC ID number of contributing federal political committee. C	PAYROLL DEDUCTION 34.45 PER PERIOD
	Name of Employer Occupation UTILITY WORKERS UNION OF AMERI ORGANIZER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 585.65	

<b>B.</b>	Full Name (Last, First, Middle Initial) LEONIDAS LABELLE	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 1977 YALE AVENUE	<b>Transaction ID:</b> SA11AI.7393
	City State Zip Code WILLIAMSPORT PA 17701	Amount of Each Receipt this Period 94.54
	FEC ID number of contributing federal political committee. C	PAYROLL DEDUCTION 47.27 PER PERIOD
	Name of Employer Occupation UTILITY WORKERS UNION ORGANIZER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 942.77	

<b>C.</b>	Full Name (Last, First, Middle Initial) JAMES LEWIS	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 2120 LONDERGRAN STREET	<b>Transaction ID:</b> SA11AI.7394
	City State Zip Code PITTSBURGH PA 15216	Amount of Each Receipt this Period 103.04
	FEC ID number of contributing federal political committee. C	PAYROLL DEDUCTION 51.52 PER PERIOD
	Name of Employer Occupation UTILITY WORKERS UNION OF AMERICA, AFL NATIONAL REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1050.84	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	266.48
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) ROBERT MAHONEY	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 217 PONDEROSA DRIVE	<b>Transaction ID:</b> SA11AI.7395
	City State Zip Code HANOVER MA 02339	Amount of Each Receipt this Period 103.04
	FEC ID number of contributing federal political committee. <b>C</b>	<b>PAYROLL DEDUCTION 51.52 PER PERIOD</b>
Name of Employer UTILITY WORKERS UNION OF AMERICA, AFL-	Occupation NATIONAL ORGANIZER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1133.44	

<b>B.</b>	Full Name (Last, First, Middle Initial) GEORGE MANOOGIAN	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 1100 WESTBORO	<b>Transaction ID:</b> SA11AI.7396
	City State Zip Code BIRMINGHAM MI 48009	Amount of Each Receipt this Period 113.44
	FEC ID number of contributing federal political committee. <b>C</b>	<b>PAYROLL DEDUCTION 56.72 PER PERIOD</b>
Name of Employer UTILITY WORKERS UNION OF AMERICA	Occupation NATIONAL REP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 964.24	

<b>C.</b>	Full Name (Last, First, Middle Initial) HELEN OLAGUE-PIMENTEL	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 14634 HUTCHCROFT STREET	<b>Transaction ID:</b> SA11AI.7385
	City State Zip Code LA PUENTE CA 91744	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>EX BOARD MONTHLY CONTRIBUTION</b>
Name of Employer UTILITY WORKERS UNION OF AMERI	Occupation EXECUTIVE BOARD MEMBER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>266.48</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 15  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
DONALD OPATKA

Mailing Address 7559 ANCHOR LANE

City NORTHFIELD State OH Zip Code 44067

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

Name of Employer UTILITY WORKERS UNION OF AMERICA Occupation REGIONAL DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1247.84

Date of Receipt 11 / 30 / 2009

Transaction ID: SA11AI.7397

Amount of Each Receipt this Period 113.44

PAYROLL DEDUCTION 56.72 PER PERIOD

**B.**

Full Name (Last, First, Middle Initial)  
WILLIAM STERNER

Mailing Address 333 STATE STREET

City CHARLEROI State PA Zip Code 15022

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

Name of Employer UTILITY WORKERS UNION OF AMERICA Occupation EXECUTIVE BOARD MEMBER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 30 / 2009

Transaction ID: SA11AI.7398

Amount of Each Receipt this Period 100.00

PAYROLL DEDUCTION 50.00 PER PERIOD

**C.**

Full Name (Last, First, Middle Initial)  
GARY SULLIVAN

Mailing Address 170 OLD WASHINGTON STREET

City HANOVER State MA Zip Code 02339

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

Name of Employer UTILITY WORKERS UNION OF AMERICA Occupation EXECUTIVE BOARD MEMBER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 30 / 2009

Transaction ID: SA11AI.7408

Amount of Each Receipt this Period 25.00

EX BOARD MONTHLY CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 238.44

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 15  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
SAM WEINSTEIN

Mailing Address 8219 FLOWER AVENUE

City State Zip Code  
TAKOMA PARK MD 20912-6858

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

Name of Employer Occupation  
UTILITY WORKERS UNION ASST TO THE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1194.38

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2009

Transaction ID: SA11AI.7399

Amount of Each Receipt this Period  
108.58

PAYROLL DEDUCTION 54.29

**B.**

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

Mailing Address 10103 LIVE OAK AVENUE

City State Zip Code  
CHERRY VALLEY CA 92223

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

Name of Employer Occupation  
UTLITY WORKERS UNION OF AMERIC LEGAL ADVISER TO PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2009

Transaction ID: SA11AI.7400

Amount of Each Receipt this Period  
25.00

PAYROLL DEDUCTION 12.50 PER PERIOD

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>133.58</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>1955.41</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) GERRY CONNOLLY FOR CONGRESS</p> <p>Mailing Address PO BOX 563</p> <p>City MERRIFIELD State VA Zip Code 22116</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7354</p> <p>Date of Disbursement 11 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) JUDY CHU FOR CONGRESS</p> <p>Mailing Address 1531 PURDUE AVE</p> <p>City LOS ANGELES State CA Zip Code 90623</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 32</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7355</p> <p>Date of Disbursement 11 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) SCHAUER FOR CONGRESS</p> <p>Mailing Address PO BOX 100</p> <p>City BATTLE CREEK State MI Zip Code 49016</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7351</p> <p>Date of Disbursement 11 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>

**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)

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

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

A.	Full Name (Last, First, Middle Initial) SCHAUER FOR CONGRESS	Transaction ID: SB23.7352
	Mailing Address PO BOX 100	Date of Disbursement 11 / 03 / 2009
	City BATTLE CREEK State MI Zip Code 49016	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement CONTRIBUTION	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MI District: 07	

B.	Full Name (Last, First, Middle Initial) STABENOW FOR US SENATE	Transaction ID: SB23.7353
	Mailing Address PO BOX 4945	Date of Disbursement 11 / 12 / 2009
	City EAST LANSING State MI Zip Code 48826	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CONTRIBUTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MI District: 00	

C.	Full Name (Last, First, Middle Initial) STABENOW FOR US SENATE	Transaction ID: SB23.7383
	Mailing Address PO BOX 4945	Date of Disbursement 11 / 17 / 2009
	City EAST LANSING State MI Zip Code 48826	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CONTRIBUTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MI District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>7000.00</b>