

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 03 01 2009 through 03 31 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 Mr. Oscar Owens

Signature of Treasurer Electronically Filed by Mr. Oscar Owens Date 04 16 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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
AMALGAMATED TRANSIT UNION-COPE

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

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" 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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		114470.36
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	112669.68									
(c) Total Receipts (from Line 19)	54197.02	146321.64								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	166866.70	260792.00								
7. Total Disbursements (from Line 31)	70646.95	164572.25								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	96219.75	96219.75								
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	3

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

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	579.34	650.66
(i) Itemized (use Schedule A)		
(ii) Unitemized	53551.64	145473.58
(iii) TOTAL (add Lines 11(a)(i) and (ii)	54130.98	146124.24
(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)	54130.98	146124.24
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.)	66.04	197.40
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))	54197.02	146321.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	54197.02	146321.64

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.....	46.95	140.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	46.95	140.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	58500.00	109250.00
24. Independent Expenditure (use Schedule E)	0.00	37956.40
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.....	12100.00	17225.00
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))..	70646.95	164572.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	70646.95	164572.25

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	54130.98	146124.24
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	54130.98	146124.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	46.95	140.85
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	46.95	140.85

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 6 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

A.	Full Name (Last, First, Middle Initial) Mr. Stephen S. Farrell		Date of Receipt MM / DD / YYYY 03 / 04 / 2009		
	Mailing Address 150 Ocean Avenue		Transaction ID: SA11AI.19618		
	City Cranston	State RI	Zip Code 02905	Amount of Each Receipt this Period 265.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Rhode Island Public Transit Au	Occupation Transit operator	Aggregate Year-to-Date 265.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Mr. William G. Mc Lean		Date of Receipt MM / DD / YYYY 03 / 12 / 2009		
	Mailing Address 2350 Greensboro Drive		Transaction ID: SA11AI.19617		
	City Reno	State NV	Zip Code 89509	Amount of Each Receipt this Period 83.34	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Amalgamated Transit Union	Occupation International Vice President	Aggregate Year-to-Date 250.02		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Kevin M. Millea		Date of Receipt MM / DD / YYYY 03 / 04 / 2009		
	Mailing Address 15 Fair Street		Transaction ID: SA11AI.19619		
	City Warwick	State RI	Zip Code 02888-1601	Amount of Each Receipt this Period 231.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Rhode Island Public Transit	Occupation transit operator	Aggregate Year-to-Date 243.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	579.34
TOTAL This Period (last page this line number only)	579.34

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

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

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

A.

Full Name (Last, First, Middle Initial)
BETTY SUTTON FOR CONGRESS

Transaction ID: SB23.19634
Date of Disbursement

Mailing Address 1700 W MARKET ST #155

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	0	9

City AKRON State OH Zip Code 44313

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

--

Candidate Name

Category/ Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OH District: 13

B.

Full Name (Last, First, Middle Initial)
BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMEN-
TS PAC (BRIDGE PAC)

Transaction ID: SB23.19602
Date of Disbursement

Mailing Address 499 SOUTH CAPITOL ST SW SUITE 422

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement

--

Candidate Name

Category/ Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Other

C.

Full Name (Last, First, Middle Initial)
DAN LIPINSKI FOR CONGRESS

Transaction ID: SB23.19613
Date of Disbursement

Mailing Address 4501 GRAND

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

City WESTERN SPRINGS State IL Zip Code 60558

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

--

Candidate Name

Category/ Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 03

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

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

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

A. Full Name (Last, First, Middle Initial)
DAN LIPINSKI FOR CONGRESS

Mailing Address 4501 GRAND

City WESTERN SPRINGS State IL Zip Code 60558

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 03

Transaction ID: SB23.19629

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

B. Full Name (Last, First, Middle Initial)
DAVE WU FOR CONGRESS

Mailing Address 818 SW 3RD ST #1182

City PORTLAND State OR Zip Code 97205

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OR District: 01

Transaction ID: SB23.19595

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 SOUTH CAPITOL STREET

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.19610

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ►

10000.00

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

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

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

A.	Full Name (Last, First, Middle Initial) DINA TITUS FOR CONGRESS	Transaction ID: SB23.19624 Date of Disbursement 03 / 30 / 2009	
	Mailing Address P. O. Box 50614 Suite C5		
	City Henderson State NV Zip Code 89016	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
B.	Full Name (Last, First, Middle Initial) DONNA EDWARDS FOR CONGRESS	Transaction ID: SB23.19615 Date of Disbursement 03 / 19 / 2009	
	Mailing Address P.O. Box 441153		
	City FORT WASHINGTON State MD Zip Code 20749	Amount of Each Disbursement this Period 500.00	
	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
C.	Full Name (Last, First, Middle Initial) DOYLE FOR CONGRESS COMMITTEE	Transaction ID: SB23.19604 Date of Disbursement 03 / 06 / 2009	
	Mailing Address 2227 HAMPTON STREET		
	City PITTSBURGH State PA Zip Code 15218	Amount of Each Disbursement this Period 5000.00	
	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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional)	6500.00
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 10 / 22

<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

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

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

A.	Full Name (Last, First, Middle Initial) FEINGOLD SENATE COMMITTEE <hr/> Mailing Address PO BOX 620062 <hr/> City MIDDLETON State WI Zip Code 53562 Purpose of Disbursement Candidate Name Category/Type Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WI District: 00	Transaction ID: SB23.19627 Date of Disbursement <table border="1" style="width: 100%;"> <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>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">2500.00</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	0	9													
B.	Full Name (Last, First, Middle Initial) FRIENDS OF MAZIE HIRONO <hr/> Mailing Address PO BOX 677 <hr/> City HONOLULU State HI Zip Code 96809 Purpose of Disbursement Candidate Name Category/Type Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: HI District: 02	Transaction ID: SB23.19631 Date of Disbursement <table border="1" style="width: 100%;"> <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>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">1000.00</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	0	9													
C.	Full Name (Last, First, Middle Initial) JUDY CHU FOR CONGRESS <hr/> Mailing Address 777 S FIGUEROA STREET SUITE 4050 <hr/> City LOS ANGELES State CA Zip Code 90017 Purpose of Disbursement Candidate Name Category/Type Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 32	Transaction ID: SB23.19607 Date of Disbursement <table border="1" style="width: 100%;"> <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>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">2500.00</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													

SUBTOTAL of Disbursements This Page (optional)	<div style="border: 1px solid black; padding: 5px;">6000.00</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; padding: 5px;"> </div>

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

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

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

A. Full Name (Last, First, Middle Initial)
KATHY DAHLKEMPER FOR CONGRESS

Mailing Address PO Box 1045

City Erie State PA Zip Code 16512

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: PA District: 03

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.19605
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
KURT SCHRADER FOR CONGRESS

Mailing Address 2525 N BAKER DR

City CANBY State OR Zip Code 97013

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: OR District: 05

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.19596
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
MARKEY FOR CONGRESS

Mailing Address PO Box 1333

City Fort Collins State CO Zip Code 80521

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: CO District: 04

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.19632
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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

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

A. Full Name (Last, First, Middle Initial)
NIKI TSONGAS COMMITTEE, THE

Mailing Address PO Box 1454

City Lowell State MA Zip Code 01853

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MA District: 05

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.19614
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

B. Full Name (Last, First, Middle Initial)
PASCRELL FOR CONGRESS INC

Mailing Address 63 QUARTZ LANE

City PATERSON State NJ Zip Code 07501

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NJ District: 08

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.19598
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

C. Full Name (Last, First, Middle Initial)
SCHIFF FOR CONGRESS

Mailing Address 555 CAPITOL MALL SUITE 1425

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: CA District: 27

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.19616
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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

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

A.	Full Name (Last, First, Middle Initial) SCOTT MURPHY FOR CONGRESS COMMITTEE	Transaction ID: SB23.19599 Date of Disbursement 03 / 04 / 2009
	Mailing Address 615 GLEN ST	Amount of Each Disbursement this Period 5000.00
	City GLENS FALLS State NY Zip Code 12801	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General

B.	Full Name (Last, First, Middle Initial) SHERMAN FOR CONGRESS	Transaction ID: SB23.19630 Date of Disbursement 03 / 26 / 2009
	Mailing Address 555 SOUTH FLOWER STREET SUITE 4510	Amount of Each Disbursement this Period 2000.00
	City LOS ANGELES State CA Zip Code 90071	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SIREs FOR CONGRESS	Transaction ID: SB23.19597 Date of Disbursement 03 / 04 / 2009
	Mailing Address 6050 BOULEVARD EAST APT 6B	Amount of Each Disbursement this Period 1000.00
	City WEST NEW YORK State NJ Zip Code 07093	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)

PAGE 15 / 22

<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

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

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

A.

Full Name (Last, First, Middle Initial)
WOOLSEY FOR CONGRESS

Transaction ID: SB23.19594

Date of Disbursement

Mailing Address P.O. BOX 750176

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	0	9

City State Zip Code
PETALUMA CA 94975

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 06

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

58500.00

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)

PAGE 16 / 22

<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

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

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

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Michele Zappala Peck</p> <p>Mailing Address 2901 Grant Building 310 Grant Street</p> <p>City Pittsburgh State PA Zip Code 15219</p> <p>Purpose of Disbursement Non federal contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.19578 Date of Disbursement 03 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 100.00</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Tim Solobay</p> <p>Mailing Address 107 Hawthorne Street</p> <p>City Canonsburgh State PA Zip Code 15317</p> <p>Purpose of Disbursement Non federal contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.19583 Date of Disbursement 03 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p>C. Full Name (Last, First, Middle Initial) Don Walko Committee</p> <p>Mailing Address P.O. Box 8493</p> <p>City Pittsburgh State PA Zip Code 15220</p> <p>Purpose of Disbursement Non federal contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.19580 Date of Disbursement 03 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 100.00</p>

SUBTOTAL of Disbursements This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

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

<p>A. Full Name (Last, First, Middle Initial) Elect Bill Kortz Committee</p> <p>Mailing Address 514 Ridgeview Drive</p> <p>City Dravosburg State PA Zip Code 15034</p> <p>Purpose of Disbursement Non federal contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.19591 Date of Disbursement 03 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Chelsa Wagner</p> <p>Mailing Address P.O. Box 96050</p> <p>City Pittsburgh State PA Zip Code 15226</p> <p>Purpose of Disbursement Non federal contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.19590 Date of Disbursement 03 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Deron Gabriel</p> <p>Mailing Address 624 Turnberry Lane</p> <p>City Oakdale State PA Zip Code 15071</p> <p>Purpose of Disbursement Non federal contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.19576 Date of Disbursement 03 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1250.00

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 18 / 22

<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

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

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

A.	Full Name (Last, First, Middle Initial) Friends of Ferlo Mailing Address P.O. Box 9002 City Pittsburgh State PA Zip Code 15224 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) ▼	Transaction ID: SB29.19582 Date of Disbursement 03 / 23 / 2009 Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Friends of Judge Susan Mailing Address 116 Ashley Court City Pittsburgh State PA Zip Code 15221 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) ▼	Transaction ID: SB29.19586 Date of Disbursement 03 / 23 / 2009 Amount of Each Disbursement this Period 2500.00
C.	Full Name (Last, First, Middle Initial) Friends of Nancy Navarro Mailing Address P.O. Box 10847 City Silver Spring State MD Zip Code 20904 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) ▼	Transaction ID: SB29.19564 Date of Disbursement 03 / 19 / 2009 Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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 19 / 22

<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

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

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

A.	Full Name (Last, First, Middle Initial) Friends of Patrick Reilly <hr/> Mailing Address P.O. Box 9650 <hr/> City Pittsburgh State PA Zip Code 15226 <hr/> Purpose of Disbursement Non federal contribution Candidate Name <hr/> 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) ▼	Transaction ID: SB29.19588 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Friends of Paul Drucker <hr/> Mailing Address 400 Franklin Avenue <hr/> City Phoenixville State PA Zip Code 19460 <hr/> Purpose of Disbursement Non federal contribution Candidate Name <hr/> 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) ▼	Transaction ID: SB29.19574 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Friends of Valerie Ervin <hr/> Mailing Address P.O. Box 11120 <hr/> City Takoma Park State MD Zip Code 20913 <hr/> Purpose of Disbursement Non federal contribution Candidate Name <hr/> 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) ▼	Transaction ID: SB29.19563 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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 20 / 22

<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

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

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

A. Full Name (Last, First, Middle Initial) Invest in Virginia PAC Mailing Address P.O. Box 8991 City Reston State VA Zip Code 20195 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) ▼	Transaction ID: SB29.19568 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00 Category/Type

B. Full Name (Last, First, Middle Initial) Jim Motznik for District Judge Mailing Address P.O. Box 96053 City Pittsburgh State PA Zip Code 15226 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) ▼	Transaction ID: SB29.19572 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00 Category/Type

C. Full Name (Last, First, Middle Initial) Judge Jack A. Panella for Supreme Court Mailing Address 2925 William Penn Highway Suite 301 City Easton State PA Zip Code 18045 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) ▼	Transaction ID: SB29.19592 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

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

A.	Full Name (Last, First, Middle Initial) Marmo for Judge Committee	Transaction ID: SB29.19570 Date of Disbursement
	Mailing Address 112 Washington Place Suite 1A	<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Pittsburgh State PA Zip Code 15219	Amount of Each Disbursement this Period
	Purpose of Disbursement Non federal contribution	<input type="text" value="100.00"/>
	Candidate Name	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Moon for Supervisor	Transaction ID: SB29.19566 Date of Disbursement
	Mailing Address P.O. Box 1122	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City Annandale State VA Zip Code 22003	Amount of Each Disbursement this Period
	Purpose of Disbursement Non federal contribution	<input type="text" value="250.00"/>
	Candidate Name	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Phil Ignelzi for Judge	Transaction ID: SB29.19584 Date of Disbursement
	Mailing Address 245 Fort Pitt Boulevard	<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Pittsburgh State PA Zip Code 15222	Amount of Each Disbursement this Period
	Purpose of Disbursement Non federal contribution	<input type="text" value="2500.00"/>
	Candidate Name	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2850.00"/>
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)

PAGE 22 / 22

<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

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

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

A. Full Name (Last, First, Middle Initial)
The June Berry Darensburg Campaign Committee

Mailing Address P.O. Box 531

City Gretna State LA Zip Code 70054

Purpose of Disbursement
Non federal contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.19561
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Vic Villarreal, Ph.D.

Mailing Address P.O. Box 181

City Leander State TX Zip Code 78646

Purpose of Disbursement
Non federal contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.19558
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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