



# Amalgamated Transit Union

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

RECEIVED  
FEDERAL ELECTION COMMISSION  
COMMISSION MAIL ROOM

2000 FEB 17 A 11:17

Office of the International Secretary-Treasurer

February 17, 2000

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

Dear Sir or Madam:

Enclosed please find a copy of the February Report covering the period of January 1, 2000 through January 31, 2000 for Amalgamated Transit Union-COPE.

Trusting this meets with your satisfaction, I am

Sincerely,

Oliver W. Green  
International Secretary-  
Treasurer/COPE Director

/s/  
Enclosure



# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(SUMMARY PAGE)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

2000 FEB 17 A 11:17

1. NAME OF COMMITTEE (in full)  
**AMALGAMATED TRANSIT UNION - COPE**

ADDRESS (number and street)  Check if different than previously reported  
**5025 WISCONSIN AVENUE, NW**

CITY, STATE and ZIP CODE  
**WASHINGTON, D.C. 20016**

2. FED IDENTIFICATION NUMBER  
**C00032995**

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

4. TYPE OF REPORT

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

Monthly Report Due On:

- February 20  June 20  October 20  
 March 20  July 20  November 20  
 April 20  August 20  December 20  
 May 20  September 20  January 31
- Twelfth day report preceding \_\_\_\_\_ (Type of Election) \_\_\_\_\_  
election on \_\_\_\_\_ in the state of \_\_\_\_\_
- Thirtieth day report following the General Election on \_\_\_\_\_  
\_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>01/01/00</u> through <u>***</u> <u>01/31/00</u>		
6. (a) Cash on Hand January 1, 20 <u>00</u>		\$ 197,639.96
(b) Cash on Hand at Beginning of Reporting Period	\$ 197,639.96	
(c) Total Receipts (from Line 19)	\$ 23,730.68	\$ 23,730.68
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 221,370.64	\$ 221,370.64
7. Total Disbursements (from Line 30)	\$ 18,800.00	\$ 18,800.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 202,570.64	\$ 202,570.64
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ NONE	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ NONE	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.		
Type or Print Name of Treasurer <b>OLIVER W. GREEN</b>		
Signature of Treasurer <i>Oliver W. Green</i>		Date <b>02/17/00</b>

For further information contact:  
Federal Election Commission  
950 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-218-3420

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

PAGE 2, FEC FORM 3X

NAME OF COMMITTEE

**Amalgamated Transit Union - COPE**

REPORT COVERING PERIOD

FROM: 01/01/00

TO: 01/31/00

		COLUMN A	COLUMN B
		Total This Period	Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
I. Itemized (use Schedule A)		750.00	750.00
II. Unitemized		22,031.59	22,031.59
III. Total	.....(add i and ii) >	22,781.59	22,781.59
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions	.....(add a III, b and c) >	22,781.59	22,781.59
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		949.09	949.09
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts	.....(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	23,730.68	23,730.68
20. Total Federal Receipts	.....(subtract line 18 from line 19) >	23,730.68	23,730.68
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures			
c. Total Operating Expenditures	.....(add a i, a ii, and b) >	0.00	0.00
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		18,500.00	18,500.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees(2 U.S.C.441a)(use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds	.....(add a, b and c) >	0.00	0.00
29. Other Disbursements		300.00	300.00
30. Total Disbursements	.....(add 21c, 22, 23, 24, 25, 26, 27, 28d and 29) >	18,800.00	18,800.00
31. Total Federal Disbursements	.....(subtract line 21 a II from line 30) >	18,800.00	18,800.00
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)		22,781.59	22,781.59
33. Total Contribution Refunds (from line 28d)		0.00	0.00
34. Net Contributions (other than loans)(subtract line 33 from 32)		22,781.59	22,781.59
35. Total Federal Operating Expenditures	.....(add 21 a I and 21 b) >	0.00	0.00
36. Offsets to Operating Expenditures (from line 15)		---	---
37. Net Operating Expenditures	.....(subtract line 36 from 35) >	0.00	0.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER

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**

<b>A. Full Name, Mailing Address and ZIP Code</b> Earle W. Pulnam 9116 Coronado Terrace Fairfax, VA 22031	Name of Employer Retired	Day (month, day, year) 01/21/00	Amount of Each Disbursement This Period 250.00
	Occupation _____	Aggregate Year-to-Date \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): _____			

<b>B. Full Name, Mailing Address and ZIP Code</b> David L. Carter 3235 NE 94th Seattle, WA 98115-3655	Name of Employer Municipality of Metro Seattle	Day (month, day, year) 01/13/00	Amount of Each Disbursement This Period 500.00
	Occupation _____	Aggregate Year-to-Date \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): _____			

<b>C. Full Name, Mailing Address and ZIP Code</b> _____ _____ _____	Name of Employer _____	Day (month, day, year) _____	Amount of Each Disbursement This Period _____
	Occupation _____	Aggregate Year-to-Date \$ _____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____			

<b>D. Full Name, Mailing Address and ZIP Code</b> _____ _____ _____	Name of Employer _____	Day (month, day, year) _____	Amount of Each Disbursement This Period _____
	Occupation _____	Aggregate Year-to-Date \$ _____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____			

<b>E. Full Name, Mailing Address and ZIP Code</b> _____ _____ _____	Name of Employer _____	Day (month, day, year) _____	Amount of Each Disbursement This Period _____
	Occupation _____	Aggregate Year-to-Date \$ _____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____			

<b>F. Full Name, Mailing Address and ZIP Code</b> _____ _____ _____	Name of Employer _____	Day (month, day, year) _____	Amount of Each Disbursement This Period _____
	Occupation _____	Aggregate Year-to-Date \$ _____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____			

<b>G. Full Name, Mailing Address and ZIP Code</b> _____ _____ _____	Name of Employer _____	Day (month, day, year) _____	Amount of Each Disbursement This Period _____
	Occupation _____	Aggregate Year-to-Date \$ _____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____			

<b>SUBTOTAL of Receipts This Page (optional)</b> .....	_____
<b>TOTAL This Period (last page this line number only)</b> .....	750.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)

**AMALGAMATED TRANSIT UNION - COPE**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
Lynn Woolsey P.O. Box 750176 Petaluma, CA 94975-0176	Lynn Woolsey Candidate, 6th (CA) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	01/18/00	1,000.00
Hilda Solis 1531 Purdue Avenue Los Angeles, Ca 90025	Hilda Solis Candidate 31st (CA) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	01/18/00	500.00
Jim Florio 2014 Route 22, East Suite 201 Scotch Plains, NJ 07076	Jim Florio, Senate Candidate, (NJ) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	01/20/00	1,000.00
Frank A. LoBiondo P.O. Box 550 Vineland, NJ 08362-0550	Frank A. LoBiondo Candidate, 2nd (NJ) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	01/28/00	1,000.00
Democratic National Committee 430 South Capitol Street, SE Washington, DC 20003	Democratic National (DC) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	01/28/00	5,000.00
Democratic Senatorial Campaign Com 430 South Capitol Street, SE Washington, DC 20003	Democratic National Com (DC) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	01/28/00	5,000.00
Democratic Congressional Campaign 430 South Capitol Street, SE Washington, DC 20003	Democratic Congressional Committee, (DC) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	01/28/00	5,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Day (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Day (month, day, year)	Amount of Each Disbursement This Period

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

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

18,500.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
Thomas Petrone P.O. Box 8541 Pittsburgh, PA 15220	Thomas Petrone, PA Senate Candidate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	01/05/00	200.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
Thomas A. Michlovic 1117 Prestain Road North Versailles, PA 15137	Thomas A. Michlovic, PA Senate Candidate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	01/18/00	100.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Day (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)		

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

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

300.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 2-17-00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>Jel</i> PREPARER	2-17-00 DATE PREPARED