

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 (12S)
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 06 01 2010 through 06 30 2010

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 07 15 2010

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
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	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>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		99175.20
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	127686.56									
(c) Total Receipts (from Line 19)	7571.47	80936.84								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	135258.03	180112.04								
7. Total Disbursements (from Line 31)	34400.00	79254.01								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	100858.03	100858.03								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
UTILITY WORKERS UNION OF AMERICA COPE

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	1983.77	8792.18
(ii) Unitemized	5587.70	72144.66
(iii) TOTAL (add Lines 11(a)(i) and (ii)	7571.47	80936.84
(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)	7571.47	80936.84
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))	7571.47	80936.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7571.47	80936.84

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	4.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	4.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15500.00	53000.00
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.....	18900.00	26250.00
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))..	34400.00	79254.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34400.00	79254.01

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	7571.47	80936.84
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7571.47	80936.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	4.01
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	4.01

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
							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)
UTILITY WORKERS UNION OF AMERICA COPE

A.

Full Name (Last, First, Middle Initial)
STEWART J. ACUFF

Mailing Address 8115 HARTFORD AVENUE

City State Zip Code
SILVER SPRING MD 20910

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

Name of Employer Occupation
UTILITY WORKERS UNION OF AMERI CHIEF OF STAFF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 293.10

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.7665

Amount of Each Receipt this Period
117.24

PAYROLL DEDUCTION 58.62 PER PERIOD

B.

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

Mailing Address 3700 EDGEWOOD DRIVE

City State Zip Code
LORAIN OH 44053

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

Name of Employer Occupation
UTILITY WORKERS UNION OF NATIONAL REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 639.02

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.7646

Amount of Each Receipt this Period
106.50

PAYROLL DEDUCTION 53.25 PER PERIOD

C.

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

Mailing Address 2508 PHEASANT HOLLOW DR

City State Zip Code
PLAINSBORO NJ 08536

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.7647

Amount of Each Receipt this Period
50.00

EX BOARD MEMBER CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **273.74**

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"/> 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)
UTILITY WORKERS UNION OF AMERICA COPE

A.	Full Name (Last, First, Middle Initial) KELLY J. COOPER	Date of Receipt MM / DD / YYYY 06 / 15 / 2010
	Mailing Address 520 MCNEILAN ROAD	Transaction ID: SA11AI.7669
	City State Zip Code WEST UNION OH 45693	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	EX BOARD MEMBER 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 ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) JOHN DEVLIN	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 37 BRILL LANE	Transaction ID: SA11AI.7648
	City State Zip Code POUGHQUAG NY 12570	Amount of Each Receipt this Period 106.50
	FEC ID number of contributing federal political committee. C	PAYROLL DEDUCTION 53.25 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 ▼ 639.02	

C.	Full Name (Last, First, Middle Initial) JOHN DUFFY	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 286 HOWARD ST	Transaction ID: SA11AI.7649
	City State Zip Code WASHINGTON TOWNSHI NJ 07676	Amount of Each Receipt this Period 162.93
	FEC ID number of contributing federal political committee. C	PAYROLL DEDUCTION
Name of Employer UTILITY WORKERS UNION OF AMER	Occupation OFFICIER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 977.58	

SUBTOTAL of Receipts This Page (optional)	319.43
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 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

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)
SHAWN GARVEY

Mailing Address 16 GRAND AVENUE

City State Zip Code
LYNBROOK NY 11563

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.44

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.7650

Amount of Each Receipt this Period

97.72

PAYROLL DEDUCTION 48.86
PER PERIOD

B.

Full Name (Last, First, Middle Initial)
JAMES GENNETT

Mailing Address 319 DIANA COURT

City State Zip Code
BENSONVILLE IL 60106

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

Name of Employer Occupation
UTILITY WORKERS UNION OF AMER NATIONAL REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
394.30

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.7651

Amount of Each Receipt this Period

97.72

PAYROLL DEDUCTION 48.86
PER PERIOD

C.

Full Name (Last, First, Middle Initial)
RICHARD HARKINS

Mailing Address 21557 SHEFFIELD

City State Zip Code
FARMINGTON HILLS MI 48335

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.7652

Amount of Each Receipt this Period

50.00

EX BOARD MEMBER CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

245.44

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 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

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)
JAMES HARRISON

Mailing Address 3539 ARMOUR

City State Zip Code
PORT HURON MI 48060

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 ▼
1230.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2010

Transaction ID: SA11AI.7653

Amount of Each Receipt this Period
205.00

EX BOARD MEMBER CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JOHN HOLLAND

Mailing Address 8 WALNUT STREET

City State Zip Code
FOXBORO MA 02035

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 ▼
703.50

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.7654

Amount of Each Receipt this Period
117.24

PAYROLL DEDUCTION 58.62 PER PERIOD

C.

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

Mailing Address 42 RAVENWOOD BLVD

City State Zip Code
BARNEGAT NJ 08005

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

Name of Employer
UTILITY WORKERS UNION OF AMERICA

Occupation
NATIONAL ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
639.02

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.7655

Amount of Each Receipt this Period
106.50

PAYROLL DEDUCTION 53.25 PER PERIOD

SUBTOTAL of Receipts This Page (optional) ► **428.74**

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 10 / 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

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)
LARRY KELLEY

Mailing Address 270 MANSFIELD RD

City WASHINGTON State PA Zip Code 15301

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

Name of Employer UTILITY WORKERS UNION OF AMERI Occupation ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 427.31

Date of Receipt 06 / 30 / 2010

Transaction ID: SA11AI.7656

Amount of Each Receipt this Period 71.22

PAYROLL DEDUCTION 35.61 PER PERIOD

B.

Full Name (Last, First, Middle Initial)
LEONIDAS LABELLE

Mailing Address 1977 YALE AVENUE

City WILLIAMSPORT State PA Zip Code 17701

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

Name of Employer UTILITY WORKERS UNION Occupation ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 586.32

Date of Receipt 06 / 30 / 2010

Transaction ID: SA11AI.7657

Amount of Each Receipt this Period 97.72

PAYROLL DEDUCTION 48.86 PER PERIOD

C.

Full Name (Last, First, Middle Initial)
JAMES LEWIS

Mailing Address 2120 LONDERGRAN STREET

City PITTSBURGH State PA Zip Code 15216

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

Name of Employer UTILITY WORKERS UNION OF AMERICA, AFL Occupation NATIONAL REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 639.02

Date of Receipt 06 / 30 / 2010

Transaction ID: SA11AI.7658

Amount of Each Receipt this Period 106.50

PAYROLL DEDUCTION 53.25 PER PERIOD

SUBTOTAL of Receipts This Page (optional) ► 275.44

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: (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	

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) ROBERT MAHONEY	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 217 PONDEROSA DRIVE	Transaction ID: SA11AI.7659
	City State Zip Code HANOVER MA 02339	Amount of Each Receipt this Period 106.50
	FEC ID number of contributing federal political committee. C	PAYROLL DEDUCTION 53.25 PER PERIOD
	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 ▼ 639.02	

B.	Full Name (Last, First, Middle Initial) GEORGE MANOOGIAN	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 1100 WESTBORO	Transaction ID: SA11AI.7660
	City State Zip Code BIRMINGHAM MI 48009	Amount of Each Receipt this Period 117.24
	FEC ID number of contributing federal political committee. C	PAYROLL DEDUCTION 58.62 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 ▼ 703.49	

C.	Full Name (Last, First, Middle Initial) DONALD OPATKA	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 7559 ANCHOR LANE	Transaction ID: SA11AI.7661
	City State Zip Code NORTHFIELD OH 44067	Amount of Each Receipt this Period 117.24
	FEC ID number of contributing federal political committee. C	PAYROLL DEDUCTION 58.62 PER PERIOD
	Name of Employer UTILITY WORKERS UNION OF AMERICA Occupation REGIONAL DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 703.49	

SUBTOTAL of Receipts This Page (optional)	340.98
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 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"/> 13	<input type="checkbox"/> 14	<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)
UTILITY WORKERS UNION OF AMERICA COPE

A.	Full Name (Last, First, Middle Initial) WILLIAM STERNER		Date of Receipt																					
	Mailing Address 333 STATE STREET		<table border="1"> <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>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		3	0		2	0	1	0														
	City State Zip Code CHARLEROI PA 15022		Transaction ID: SA11AI.7662																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00																					
Name of Employer UTILITY WORKERS UNION OF AMERICA		PAYROLL DEDUCTION 50.00 PER PERIOD																						
Occupation EXECUTIVE BOARD MEMBER																								
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00																						

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	1983.77

**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 13 / 15

<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)
UTILITY WORKERS UNION OF AMERICA COPE

A.	Full Name (Last, First, Middle Initial) KATHY DAHLKEMPER FOR CONGRESS	Transaction ID: SB23.7642 Date of Disbursement																			
	Mailing Address PO BOX 1045	<table border="1"><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>6</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	1		2	0	1	0												
	City ERIE State PA Zip Code 16512	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CONTRIBUTION	<table border="1"><tr><td>2000.00</td></tr></table>	2000.00																		
2000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) KENDRICK MEEK FOR FLORIDA	Transaction ID: SB23.7602 Date of Disbursement																			
	Mailing Address 111NW 183RD STREET SUITE 325	<table border="1"><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>6</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	2		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	2		2	0	1	0												
	City MIAMI State FL Zip Code 33169	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CONTRIBUTION	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00																		
3000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) KENDRICK MEEK FOR FLORIDA	Transaction ID: SB23.7607 Date of Disbursement																			
	Mailing Address 111NW 183RD STREET SUITE 325	<table border="1"><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>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	3		2	0	1	0												
	City MIAMI State FL Zip Code 33169	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CONTRIBUTION	<table border="1"><tr><td>5000.00</td></tr></table>	5000.00																		
5000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>10000.00</td></tr></table>	10000.00
10000.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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)
UTILITY WORKERS UNION OF AMERICA COPE

A.

Full Name (Last, First, Middle Initial)
SESTAK FOR SENATE

Mailing Address PO BOX 1936

City MEDIA State PA Zip Code 19063

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District:

Transaction ID: SB23.7640
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
TRACY EMBLEM FOR CONGRESS

Mailing Address 243 SOUTH ESCONDLDO BLVD
SUITE 718

City ESCONDLDO State CA Zip Code 92025

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 50

Transaction ID: SB23.7608
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)

PAGE 15 / 15

<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)
UTILITY WORKERS UNION OF AMERICA COPE

<p>A. Full Name (Last, First, Middle Initial) CARL WOOD FOR ASSEMBLY 2010</p> <p>Mailing Address P.O. BOX 211</p> <p>City BEAUMONT State CA Zip Code 92223</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7645</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3900.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) CHAVEZ- THOMPSON FOR LT. GOVERNOR</p> <p>Mailing Address PO BOX 6719</p> <p>City SAN ANTONIO State TX Zip Code 78209</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7610</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) JERRY BROWN 2010</p> <p>Mailing Address 291 3RD ST</p> <p>City OAKLAND State CA Zip Code 94607</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7605</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10000.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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