

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

UTILITY WORKERS UNION OF AMERICA COPE

ADDRESS (number and street) 815 16TH NW

Check if different than previously reported. (ACC) WASHINGTON DC 20006

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
 - Mar 20 (M3)
 - Apr 20 (M4)
 - May 20 (M5)
 - Jun 20 (M6)
 - Jul 20 (M7)
 - Aug 20 (M8)
 - Sep 20 (M9)
 - Oct 20 (M10)
 - Nov 20 (M11) (Non-Election Year Only)
 - Dec 20 (M12) (Non-Election Year Only)
 - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
 - General (12G)
 - Runoff (12R)
 - Convention (12C)
 - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G)
 - Runoff (30R)
 - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 08 / 01 / 2014 through [MM] / [DD] / [YYYY] 08 / 31 / 2014

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 GARY RUFFNER [Electronically Filed] Date 09 / 18 / 2014

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 | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

UTILITY WORKERS UNION OF AMERICA COPE

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2014"/> | | <input type="text" value="139388.69"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="69330.03"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="11651.81"/> | <input type="text" value="112143.15"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="80981.84"/> | <input type="text" value="251531.84"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="36800.00"/> | <input type="text" value="207350.00"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="44181.84"/> | <input type="text" value="44181.84"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="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

UTILITY WORKERS UNION OF AMERICA COPE

Report Covering the Period: From: 08 / 01 / 2014 To: 08 / 31 / 2014

| 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)..... | 3853.09 | 26039.89 |
| (ii) Unitemized | 7798.72 | 83603.26 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 11651.81 | 109643.15 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 2500.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 11651.81 | 112143.15 |
| 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 Transfers (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))..... ▶ | 11651.81 | 112143.15 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 11651.81 | 112143.15 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 300.00 | 3300.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 14000.00 | 55500.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (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 | 5000.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 5000.00 |
| 29. Other Disbursements | 22500.00 | 143550.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated 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)) .. | 36800.00 | 207350.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 36800.00 | 207350.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| 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) | 11651.81 | 112143.15 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 5000.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 11651.81 | 107143.15 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

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

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

FOR LINE NUMBER: PAGE 6 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 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

Full Name (Last, First, Middle Initial)
A. GERALD ACOSTA

Mailing Address 407 E. SAINT JOHN ROAD

City State Zip Code
PHOENIX AZ 85022

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

Name of Employer Occupation
UWUA NATINAL REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
945.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : SA11AI.5382

Amount of Each Receipt this Period
118.18

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)
B. JAMES ANDERSON

Mailing Address 2017 WEST BOROUGH DR

City State Zip Code
HEBRON KY 41048

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

Name of Employer Occupation
UWUA EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : SA11AI.5366

Amount of Each Receipt this Period
50.00

EXB MEMBER CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MARK BROOKS

Mailing Address 521 CENTRAL AVENUE

City State Zip Code
NASHVILLE TN 37211

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

Name of Employer Occupation
UWUA NATL. REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1040.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : SA11AI.5383

Amount of Each Receipt this Period
130.10

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 298.28

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 7 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. NICHOLAS J CARACAPPA
 Full Name (Last, First, Middle Initial)
 Mailing Address 486 HAWKINS RD
 City SELDEN State NY Zip Code 11784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UTILITY WORKERS UNION Occupation EXB MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 29 / 2014
Transaction ID : SA11AI.5375
 Amount of Each Receipt this Period 50.00
 EXB MEMBER CONTRIBUTION

B. NOEL CHRISTMAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2508 PHEASANT HOLLOW DR.
 City PLAINSBORO State NJ Zip Code 08536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UWUA Occupation EXB MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 637.76

Date of Receipt 08 / 29 / 2014
Transaction ID : SA11AI.5376
 Amount of Each Receipt this Period 79.72
 EXB MEMBER CONTRIBUTION

C. KELLY COOPER
 Full Name (Last, First, Middle Initial)
 Mailing Address 520 MCNEILAN ROAD
 City WEST UNION State OH Zip Code 45693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UWUA Occupation EXB MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 637.76

Date of Receipt 08 / 29 / 2014
Transaction ID : SA11AI.5370
 Amount of Each Receipt this Period 79.72
 EXB MEMBER CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 209.44
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 OF 23
(check only one)

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

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

A. PATRICK DILLON
Full Name (Last, First, Middle Initial)

Mailing Address 3534 TWIN SPRUCE DR.

| | | |
|-------------------|-------------|-------------------|
| City KALAMAZOO | State MI | Zip Code 49004 |
|-------------------|-------------|-------------------|

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

| | |
|--------------------------|--------------------------|
| Name of Employer UWUA | Occupation EXB MEMBER |
|--------------------------|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1275.52

Date of Receipt
08 / 29 / 2014
Transaction ID : SA11AI.5377

Amount of Each Receipt this Period
159.44

EXB MEMBER CONTRIBUTION

B. DANIEL DOMINGUEZ
Full Name (Last, First, Middle Initial)

Mailing Address 2847 PENASCO

| | | |
|----------------------|-------------|-------------------|
| City SAN CLEMENTE | State CA | Zip Code 92673 |
|----------------------|-------------|-------------------|

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

| | |
|--------------------------|--------------------------|
| Name of Employer UWUA | Occupation EXB MEMBER |
|--------------------------|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
637.76

Date of Receipt
08 / 29 / 2014
Transaction ID : SA11AI.5382

Amount of Each Receipt this Period
79.72

EXB MEMBER CONTRIBUTION

C. JOHN DUFFY
Full Name (Last, First, Middle Initial)

Mailing Address 286 HOWARD ST.

| | | |
|-----------------------------|-------------|-------------------|
| City WASHINGTON TOWNSHIP | State NJ | Zip Code 07676 |
|-----------------------------|-------------|-------------------|

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

| | |
|--|------------------------------|
| Name of Employer Utility Workers Union of Ameri | Occupation Vice President |
|--|------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1442.64

Date of Receipt
08 / 29 / 2014
Transaction ID : SA11AI.5387

Amount of Each Receipt this Period
180.33

PAYROLL DEDUCTION

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 419.49 |
| 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 OF 23
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. ARTURO FRIAS

Mailing Address 1317 MERCED AVENUE

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| SOUTH EL MONTE | CA | 61733 |

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
| UWUA | EXB MEMBER |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.5360

Amount of Each Receipt this Period
70.00

EXB MEMBER CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. 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 |
| UWUA | NATL. REPR. |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **901.52**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.5388

Amount of Each Receipt this Period
118.18

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)
C. 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 |
| UWUA | NATL. REPR. |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **901.52**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.5389

Amount of Each Receipt this Period
118.18

PAYROLL DEDUCTION

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 306.36 |
| 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 11 OF 23
(check only one)

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

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

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

Mailing Address 21557 SHEFFIELD

City FARMINGTON HILLS State MI Zip Code 48335

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

Name of Employer UWUA Occupation EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **637.76**

Date of Receipt **08 / 29 / 2014**

Transaction ID : SA11AI.5378

Amount of Each Receipt this Period **79.72**

EXB MEMBER CONTRIBUTION

B. JAMES HARRISON
Full Name (Last, First, Middle Initial)

Mailing Address 3539 ARMOUR

City PORT HURON State MI Zip Code 48060

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

Name of Employer UTILITY WORKERS UNION OF AMERI Occupation NATL. REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **867.36**

Date of Receipt **08 / 29 / 2014**

Transaction ID : SA11AI.5390

Amount of Each Receipt this Period **108.42**

PAYROLL DEDUCTION

C. KEITH HOLMES
Full Name (Last, First, Middle Initial)

Mailing Address 3827 ARENDELL AVENUE

City PHILADELPHIA State PA Zip Code 19114

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

Name of Employer UWUA Occupation EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **08 / 29 / 2014**

Transaction ID : SA11AI.5369

Amount of Each Receipt this Period **50.00**

EXB MEMBER CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **238.14**

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 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. 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 Occupation
UWUA NATL. REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
945.44

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : SA11AI.5391

Amount of Each Receipt this Period
118.18

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)
B. LAWRENCE KELLEY

Mailing Address 270 MANSFIELD RD

City State Zip Code
WASHINGTON PA 15301

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

Name of Employer Occupation
UWUA NATL. REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
632.16

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : SA11AI.5392

Amount of Each Receipt this Period
79.02

PAYROLL DEDUCTION

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

Mailing Address 1977 YALE AVENUE

City State Zip Code
WILLIAMSPORT PA 17701

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

Name of Employer Occupation
Utility Workers Union of Ameri National Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
867.36

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : SA11AI.5393

Amount of Each Receipt this Period
108.42

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 305.62

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 13 OF 23 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. DAVID LEONARDI
Full Name (Last, First, Middle Initial)

Mailing Address 1 PINE TREE CIRCLE

City SANDWHICH State MA Zip Code 02563

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

Name of Employer UWUA Occupation EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **640.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.5364

Amount of Each Receipt this Period
80.00

EXB MEMBER CONTRIBUTION

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

Mailing Address 2120 LONDERGRAN STREET

City PITTSBURGH State PA Zip Code 15216

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

Name of Employer UWUA Occupation NAT. REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **945.44**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.5394

Amount of Each Receipt this Period
118.18

PAYROLL DEDUCTION

C. NANCY LOGAN
Full Name (Last, First, Middle Initial)

Mailing Address 2308 ARTHUR ST.

City LOS ANGELES State CA Zip Code 90065

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

Name of Employer UWUA Occupation EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **637.76**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.5374

Amount of Each Receipt this Period
79.72

EXB MEMBER CONTRIBUTION

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 277.90 |
| 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 14 OF 23
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. ROBERT MAHONEY

Mailing Address 217 PONDEROSA AVENUE

| | | |
|-----------------|-------------|-------------------|
| City HANOVER | State MA | Zip Code 02339 |
|-----------------|-------------|-------------------|

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

| | |
|--------------------------|--------------------------|
| Name of Employer UWUA | Occupation NATL. REP. |
|--------------------------|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **945.44**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 29 | / | 2014 |

Transaction ID : SA11AI.5395

Amount of Each Receipt this Period

| |
|--------|
| 118.18 |
|--------|

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)
B. GEORGE MANOOGIAN

Mailing Address 1100 WESTBORO

| | | |
|--------------------|-------------|-------------------|
| City BIRMINGHAM | State MI | Zip Code 48009 |
|--------------------|-------------|-------------------|

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

| | |
|--------------------------|--------------------------|
| Name of Employer UWUA | Occupation NATL. REP. |
|--------------------------|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1040.80**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 29 | / | 2014 |

Transaction ID : SA11AI.5396

Amount of Each Receipt this Period

| |
|--------|
| 130.10 |
|--------|

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)
C. FRANK MEZNARICH Sr.

Mailing Address 4710 E. PLEASANT VALLEY RD

| | | |
|----------------------|-------------|-------------------|
| City INDEPENDENCE | State OH | Zip Code 44131 |
|----------------------|-------------|-------------------|

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

| | |
|--------------------------|--------------------------|
| Name of Employer UWUA | Occupation EXB MEMBER |
|--------------------------|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **873.60**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 29 | / | 2014 |

Transaction ID : SA11AI.5365

Amount of Each Receipt this Period

| |
|--------|
| 109.20 |
|--------|

EXB MEMBER CONTRIBUTION

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 357.48 |
| 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 15 OF 23
(check only one)

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

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

A. ANDREW O'CONNELL
Full Name (Last, First, Middle Initial)
Mailing Address 395 PELTON AVENUE
City STATEN ISLAND State NY Zip Code 10310
FEC ID number of contributing federal political committee. **C**
Name of Employer UWUA Occupation EXB MEMBER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 637.76

Date of Receipt 08 / 29 / 2014
Transaction ID : SA11AI.5359
Amount of Each Receipt this Period 79.72
EXB MEMBER CONTRIBUTION

B. DONALD OPATKA
Full Name (Last, First, Middle Initial)
Mailing Address 7559 ANCHOR LANE
City NORTHFIELD State OH Zip Code 44067
FEC ID number of contributing federal political committee. **C**
Name of Employer UWUA Occupation NATL. REP.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1040.80

Date of Receipt 08 / 29 / 2014
Transaction ID : SA11AI.5397
Amount of Each Receipt this Period 130.10
PAYROLL DEDUCTION

C. RICHARD PASSARELLI
Full Name (Last, First, Middle Initial)
Mailing Address 2347 WOODVIEW LANE
City NAPERVILLE State IL Zip Code 60565
FEC ID number of contributing federal political committee. **C**
Name of Employer UWUA Occupation EXB MEMBER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 637.76

Date of Receipt 08 / 29 / 2014
Transaction ID : SA11AI.5379
Amount of Each Receipt this Period 79.72
EXB MEMBER CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 289.54
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 16 OF 23 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. CHARLES RITTENHOUSE
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 408

City WESTON State WV Zip Code 26452

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

Name of Employer UWUA Occupation EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **318.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.5361

Amount of Each Receipt this Period
39.86

EXB MEMBER CONTRIBUTION

B. JAMES SHILLITTO
Full Name (Last, First, Middle Initial)

Mailing Address 67 EDMORE LANE N

City W ISLIP State NY Zip Code 11795

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

Name of Employer UWUA Occupation EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **637.76**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.5367

Amount of Each Receipt this Period
79.72

EXB MEMBER CONTRIBUTION

C. BETH SIMON
Full Name (Last, First, Middle Initial)

Mailing Address 2057 S. OXFORD AVENUE

City LOS ANGELES State CA Zip Code 90018

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

Name of Employer UWUA Occupation GRANT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **867.36**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.5398

Amount of Each Receipt this Period
108.42

PAYROLL DEDUCTION

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 228.00 |
| 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 17 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. JAMES SLEVIN

Mailing Address 53 BLACKBERRY WAY

City State Zip Code
HOPEWELL JCT. NY 12533

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

Name of Employer Occupation
UWUA EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
637.76

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : SA11AI.5368

Amount of Each Receipt this Period
79.72

EXB MEMBER CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MICHAEL P SMITH

Mailing Address 8603 ODOWLING

City State Zip Code
ONSTED MI 49265

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : SA11AI.5372

Amount of Each Receipt this Period
100.00

EXB MEMBER CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DAVID THOMPSON

Mailing Address 2066 S ST. RT 231

City State Zip Code
TIFFIN OH 44883

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

Name of Employer Occupation
UTILITY WORKERS UNION OF AMERC EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
637.76

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : SA11AI.5363

Amount of Each Receipt this Period
79.72

EXB MEMBER CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 259.44

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 18 OF 23
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. RICHARD WHALEN

Mailing Address 203 RESERVOIR RD

City State Zip Code
MT. PLEASANT PA 15666

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

Name of Employer Occupation
UWUA EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2400.00

Date of Receipt
08 / 29 / 2014
Transaction ID : SA11AI.5381

Amount of Each Receipt this Period
300.00

EXB MEMBER CONTRIBUTION

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

Mailing Address 10103 LIVE OAK AVENUE

City State Zip Code
CHERRY VALLEY CA 92223

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

Name of Employer Occupation
UWUA NATL. REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
897.28

Date of Receipt
08 / 29 / 2014
Transaction ID : SA11AI.5399

Amount of Each Receipt this Period
112.16

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 412.16 |
| TOTAL This Period (last page this line number only).....▶ | 3853.09 |

**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 checked="" 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 type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

Full Name (Last, First, Middle Initial)

A. SLO COUNTY DEMOCRATIC PARTY

Mailing Address PO BOX 15155

City SAN LUIS OBISPO State CA Zip Code 93406

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 25 / 2014

Transaction ID : SB22.5345

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

300.00

300.00

**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)

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

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

Full Name (Last, First, Middle Initial)

A. BOBBY FOR MICHIGAN

Mailing Address PO BOX 87503

City CANTON State MI Zip Code 48187

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: MI District: 11

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2014

Transaction ID : SB23.5341

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. CANNON FOR CONGRESS

Mailing Address PO BOX 954

City TRAVERSE CITY State MI Zip Code 49685

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: MI District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2014

Transaction ID : SB23.5340

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. JUDY CHU FOR CONGRESS

Mailing Address 6380 WILSHIRE BLVD # 1612

City LOS ANGELES State CA Zip Code 90048

Purpose of Disbursement
CONTRIBUTION

Candidate Name

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : SB23.5344

Amount of Each Disbursement this Period

1500.00

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

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

6500.00

**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)

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

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

Full Name (Last, First, Middle Initial)

A. SCHERTZING FOR CONGRESS

Mailing Address 236 KEDZIE STREET

City EAST LANSING State MI Zip Code 48823-4534

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: MI District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 21 | / | 2014 |

Transaction ID : SB23.5338

Amount of Each Disbursement this Period

| |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. TIM RYAN FOR CONGRESS

Mailing Address 1600 ROOSEVELT AVENUE

City NILES State OH Zip Code 44446

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: OH District: 13

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 06 | / | 2014 |

Transaction ID : SB23.5291

Amount of Each Disbursement this Period

| |
|---------|
| 2500.00 |
|---------|

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
|-------|---|-------|---|-----------|

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

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

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

| |
|---------|
| 7500.00 |
|---------|

| |
|----------|
| 14000.00 |
|----------|

**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)

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

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

Full Name (Last, First, Middle Initial)

A. 21ST CENTURY FUND

Mailing Address 606 TOWNSEND ST

City LANSING State MI Zip Code 48933

Purpose of Disbursement
Contributuion

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2014

Transaction ID : SB29.5334

Amount of Each Disbursement this Period

10000.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. CITIZENS FOR PATRICK J. O'CONNER

Mailing Address 5850 N. LINCOLN AVENUE
SUITE 101

City CHICAGO State IL Zip Code 60659

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2014

Transaction ID : SB29.5342

Amount of Each Disbursement this Period

2500.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. TAXPAYERS FOR QUINN

Mailing Address 676 N. LASALLE SUITE 300

City CHICAGO State IL Zip Code 60654

Purpose of Disbursement
CONTRIBUION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
ENERAL

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2014

Transaction ID : SB29.5335

Amount of Each Disbursement this Period

5000.00

Category/
Type

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

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

17500.00

**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)

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

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

Full Name (Last, First, Middle Initial)

A. TOM CULLERTON FOR STATE SENATE

Mailing Address 165 E NORTH AVENUE

City State Zip Code
VILLA PARK IL 60181

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : SB29.5336

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

5000.00

22500.00