



# Amalgamated Transit Union

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

Office of the International Secretary-Treasurer

July 20, 1993

Public Records Office  
Federal Election Commission  
999 E Street, N.W.  
Washington, D. C. 20463

Dear Sir:

Enclosed please find a copy of an Amended Report for June 1993, covering the period of May 1, 1993, through May 31, 1993 for Amalgamated Transit Union-COPE.

Trusting this meets with your satisfaction, I am

Sincerely,

Oliver W. Green  
International Secretary-  
Treasurer/COPE Director

/ahw  
Enclosure

JUL 20 12 27 PM '93

RECEIVED  
FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C.

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# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

JUL 20 12 27 PM '93

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
Amalgamated Transit Union  
ADDRESS (number and street)  Check if different than previously reported  
5025 Wisconsin Avenue, N.W.  
CITY, STATE and ZIP CODE  
Washington, DC 20016

2. FEC IDENTIFICATION NUMBER  
C 00032995  
3. This committee qualified as a multicandidate committee **DURING THIS** Reporting Period on \_\_\_\_\_ (date).

## 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 \_\_\_\_\_ at 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>5/1/93</u> through <u>5/31/93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ 58,977.81
(b) Cash on Hand at Beginning of Reporting Period	\$ 75,870.85	
(c) Total Receipts (from Line 19)	\$ 20,526.24	\$ 132,740.11
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 96,397.09	\$ 191,717.92
7. Total Disbursements (from Line 30)	\$ 39,850.00	\$ 135,170.83
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 56,547.09	\$ 56,547.09
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ NONE	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-378-3120
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

Oliver W. Green

Signature of Treasurer

*Oliver W. Green*

Date

7/20/93

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

FEC FORM 3X

(revised 1-1-93)

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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

NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Elizabeth Furse for Congress 233 SE 2nd Hillsboro, OR 97125	Debt Retirement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	5/20/93	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (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 <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

00003317030

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

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

500.00

**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.

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<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED <i>7-19-93</i>
<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
	DATE OF RECEIPT
<i>T.M.H.</i> PREPARER	<i>7-20-93</i> DATE PREPARED