

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Amalgamated Transit Union - COPE

ADDRESS (number and street) 5025 Wisconsin Avenue N.W.
 Check if different than previously reported. (ACC)
Washington DC 20016

2. **FEC IDENTIFICATION NUMBER** C00032995
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (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 02 01 2011 through 02 28 2011

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 Lawrence J. Hanley

Signature of Treasurer Electronically Filed by Lawrence J. Hanley Date 03 18 2011

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								
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Amalgamated Transit Union - COPE

Report Covering the Period: From:

M M	D D	Y Y Y Y
0 2	0 1	2 0 1 1

 To:

M M	D D	Y Y Y Y
0 2	2 8	2 0 1 1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date		
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y Y Y Y</td></tr><tr><td>2 0 1 1</td></tr></table>	Y Y Y Y	2 0 1 1		104818.90
Y Y Y Y				
2 0 1 1				
(b) Cash on Hand at Beginning of Reporting Period	135036.36			
(c) Total Receipts (from Line 19)	44340.77	79605.18		
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	179377.13	184424.08		
7. Total Disbursements (from Line 31)	20761.56	25808.51		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	158615.57	158615.57		
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

Amalgamated Transit Union - COPE

Report Covering the Period: From: To:

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)	14.00	1495.00
(ii) Unitemized	44314.16	78086.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	44328.16	79581.50
(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)	44328.16	79581.50
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.)	12.61	23.68
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))	44340.77	79605.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	44340.77	79605.18

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.....	161.56	208.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	161.56	208.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	25000.00
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.....	600.00	600.00
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))..	20761.56	25808.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20761.56	25808.51

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)	44328.16	79581.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	44328.16	79581.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	161.56	208.51
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	161.56	208.51

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

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

FOR LINE NUMBER: PAGE 6 / 13
(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)
Amalgamated Transit Union - COPE

A. Full Name (Last, First, Middle Initial)
KEVIN M MILLEA

Mailing Address 15 FAIR STREET

City WARWICK State RI Zip Code 02888-1601

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation Operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt: 02 / 03 / 2011
Transaction ID: A2011-286207
 Amount of Each Receipt this Period 3.00

B. Full Name (Last, First, Middle Initial)
KEVIN M MILLEA

Mailing Address 15 FAIR STREET

City WARWICK State RI Zip Code 02888-1601

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation Operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 381.00

Date of Receipt: 02 / 08 / 2011
Transaction ID: A2011-286208
 Amount of Each Receipt this Period 3.00

C. Full Name (Last, First, Middle Initial)
KEVIN M MILLEA

Mailing Address 15 FAIR STREET

City WARWICK State RI Zip Code 02888-1601

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation Operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 383.00

Date of Receipt: 02 / 14 / 2011
Transaction ID: A2011-286209
 Amount of Each Receipt this Period 2.00

SUBTOTAL of Receipts This Page (optional) ► 8.00

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

A. Form/Schedule : **SA11AI**

Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 13
	(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)
Amalgamated Transit Union - COPE

A.	Full Name (Last, First, Middle Initial) KEVIN M MILLEA		Date of Receipt																					
	Mailing Address 15 FAIR 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>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	2		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	2		2	2		2	0	1	1														
	City State Zip Code WARWICK RI 02888-1601		Transaction ID: A2011-286210																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: RHODE ISLAND PUBLIC TRANS AUTH Occupation: Operator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 386.00		3.00																						

B.	Full Name (Last, First, Middle Initial) KEVIN M MILLEA		Date of Receipt																					
	Mailing Address 15 FAIR 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>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	2		2	8		2	0	1	1														
	City State Zip Code WARWICK RI 02888-1601		Transaction ID: A2011-286211																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: RHODE ISLAND PUBLIC TRANS AUTH Occupation: Operator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 389.00		3.00																						

SUBTOTAL of Receipts This Page (optional)	6.00
TOTAL This Period (last page this line number only)	14.00

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)
Amalgamated Transit Union - COPE

A.	Full Name (Last, First, Middle Initial) Pastor for Arizona Mailing Address PO Box 1978 City Phoenix State AZ Zip Code 85001 Purpose of Disbursement Contribution Candidate Name Ed Pastor Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 04 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B377081 Date of Disbursement 02 / 16 / 2011 Amount of Each Disbursement this Period 2500.00 011 Category/Type
B.	Full Name (Last, First, Middle Initial) Bob Filner for Congress Mailing Address PO Box 121480 City Chula Vista State CA Zip Code 91912 Purpose of Disbursement Contribution Candidate Name Bob Filner Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 51 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B376143 Date of Disbursement 02 / 02 / 2011 Amount of Each Disbursement this Period 2000.00 011 Category/Type
C.	Full Name (Last, First, Middle Initial) Richardson for Congress Mailing Address 1212 S Victory Blvd City Burbank State CA Zip Code 91502 Purpose of Disbursement Contribution Candidate Name Laura Richardson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 37 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B376145 Date of Disbursement 02 / 02 / 2011 Amount of Each Disbursement this Period 1000.00 011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 13

<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)
Amalgamated Transit Union - COPE

<p>A. Full Name (Last, First, Middle Initial) Sherman for Congress</p> <p>Mailing Address 555 So. Flower St. Suite 4210</p> <p>City Los Angeles State CA Zip Code 90071</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Brad Sherman</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CA District: 27</p>	<p>Transaction ID: B376146 Date of Disbursement: 02 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Judy Chu for Congress</p> <p>Mailing Address 777 S. Figueroa St. Suite 4050</p> <p>City Los Angeles State CA Zip Code 90017</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Judy Chu</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CA District: 32</p>	<p>Transaction ID: B376663 Date of Disbursement: 02 / 09 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Janice Hahn for Congress</p> <p>Mailing Address 777 S. Figueroa Street Suite 4050</p> <p>City Los Angeles State CA Zip Code 90017</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Janice Hahn</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General</p> <p>State: CA District: 36</p>	<p>Transaction ID: B377158 Date of Disbursement: 02 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 2000.00</p>

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amalgamated Transit Union - COPE

<p>A. Full Name (Last, First, Middle Initial) Hastings for Congress</p> <p>Mailing Address P.O. Box 100277</p> <p>City Ft. Lauderdale State FL Zip Code 33310</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Alcee Hastings</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: FL District: 23</p>	<p>Transaction ID: B376147 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <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>2</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	0	2	/	2	0	1	1	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	0	2	/	2	0	1	1													
500.00																						
<p>B. Full Name (Last, First, Middle Initial) Cummings for Congress Campaign Committee</p> <p>Mailing Address PO Box 1631</p> <p>City Baltimore State MD Zip Code 21203</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Elijah E Cummings</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MD District: 07</p>	<p>Transaction ID: B377080 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <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>2</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	6	/	2	0	1	1	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	1	6	/	2	0	1	1													
2500.00																						
<p>C. Full Name (Last, First, Middle Initial) Ellison for Congress</p> <p>Mailing Address PO Box 6072</p> <p>City Minneapolis State MN Zip Code 55406</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Keith Ellison</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MN District: 05</p>	<p>Transaction ID: B376900 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <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>2</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	4	/	2	0	1	1	2000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	1	4	/	2	0	1	1													
2000.00																						

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Amalgamated Transit Union - COPE

A.	Full Name (Last, First, Middle Initial) Carnahan In Congress	Transaction ID: B376142 Date of Disbursement
	Mailing Address 7000 Chippewa St	<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>
	City St. Louis State MO Zip Code 63123	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2500.00"/>
	Candidate Name Russ Carnahan	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Carnahan In Congress	Transaction ID: B377459 Date of Disbursement
	Mailing Address 7000 Chippewa St	<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City St. Louis State MO Zip Code 63123	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2500.00"/>
	Candidate Name Russ Carnahan	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Connolly for Congress	Transaction ID: B376218 Date of Disbursement
	Mailing Address PO Box 563	<input type="text" value="02"/> / <input type="text" value="03"/> / <input type="text" value="2011"/>
	City Merrifield State VA Zip Code 22116	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="20000.00"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 13

<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)
Amalgamated Transit Union - COPE

A. Full Name (Last, First, Middle Initial) Kennedy for Indianapolis Mailing Address P.O. Box 441346 City Indianapolis State IN Zip Code 46244 Purpose of Disbursement P-2011 Mayor Indianapolis IN Candidate Name Melina Kennedy Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B376826 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Friends of FitzGerald Mailing Address 1836 W. 25th Street City Cleveland State OH Zip Code 44113 Purpose of Disbursement G-2014 Co. Executive OH Candidate Name Ed Fitzgerald Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B377082 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 1 1
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

600.00

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

600.00