

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 AVE. 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 (12G)
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 07 01 2007 through 07 31 2007

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 Mr. Oscar Owens
Signature of Treasurer Electronically Filed by Mr. Oscar Owens Date 08 10 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
AMALGAMATED TRANSIT UNION-COPE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		123156.36
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	129362.30									
(c) Total Receipts (from Line 19)	60581.31	363662.25								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	189943.61	486818.61								
7. Total Disbursements (from Line 31)	29450.00	326325.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	160493.61	160493.61								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
AMALGAMATED TRANSIT UNION-COPE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	3294.00	11061.36
(i) Itemized (use Schedule A)	56859.65	349526.95
(ii) Unitemized	60153.65	360588.31
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	60153.65	360588.31
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.)	427.66	3073.94
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))	60581.31	363662.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	60581.31	363662.25

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	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.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17500.00	278050.00
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.....	11950.00	48275.00
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))..	29450.00	326325.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	29450.00	326325.00

DETAILED SUMMARY PAGE
of Disbursements

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)	60153.65	360588.31
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	60153.65	360588.31
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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 35
	<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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Mr. Dale E. Anderson		Date of Receipt M M / D D / Y Y Y Y Y 07 / 06 / 2007
Mailing Address 2218 South 19th Street		Transaction ID: SA11A1.15207
City State Zip Code Lacrosse WI 54601-6705	Amount of Each Receipt this Period 335.00	
FEC ID number of contributing federal political committee. C		
Name of Employer City of Lacrosse	Occupation Transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1260.00	

Full Name (Last, First, Middle Initial) B. Mr. Dale E. Anderson		Date of Receipt M M / D D / Y Y Y Y Y 07 / 23 / 2007
Mailing Address 2218 South 19th Street		Transaction ID: SA11A1.15208
City State Zip Code Lacrosse WI 54601-6705	Amount of Each Receipt this Period 315.00	
FEC ID number of contributing federal political committee. C		
Name of Employer City of Lacrosse	Occupation Transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1575.00	

Full Name (Last, First, Middle Initial) C. Mr. Paul J. Bachtel		Date of Receipt M M / D D / Y Y Y Y Y 07 / 18 / 2007
Mailing Address 8513 Main Street #203		Transaction ID: SA11A1.15222
City State Zip Code Edmonds WA 98026	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County Metro Transit	Occupation Transit Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 35
	<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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Mr. Robert E. Bangs		Date of Receipt M M / D D / Y Y Y Y 07 / 05 / 2007
Mailing Address 2411 South 248th Street #D-12		Transaction ID: SA11A1.15209
City State Zip Code Kent WA 98032-4070	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County Metro Transit	Occupation Transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Prenoyal C. Davis		Date of Receipt M M / D D / Y Y Y Y 07 / 05 / 2007
Mailing Address 19004 Silver Creek Avenue E		Transaction ID: SA11A1.15225
City State Zip Code Puyallup WA 98375	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King county DOT-Metro Transit	Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mr. Herbert Dill		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2007
Mailing Address 148 Bayhill Village Drive		Transaction ID: SA11A1.15236
City State Zip Code O'Fallon MO 63368	Amount of Each Receipt this Period 160.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Bi-State Development Agency	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 831.00	

SUBTOTAL of Receipts This Page (optional) ▶	260.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 35
	<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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Jimmie R. Ekdahl		Date of Receipt M M / D D / Y Y Y Y 07 / 05 / 2007
Mailing Address 13218 Third S		Transaction ID: SA11A1.15210
City State Zip Code Seattle WA 98168	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County DOT-Metro Transit	Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Mr. David S. Fairbanks		Date of Receipt M M / D D / Y Y Y Y 07 / 05 / 2007
Mailing Address 8622 202nd SW		Transaction ID: SA11A1.15215
City State Zip Code Edmonds WA 98026-6644	Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.00	

Full Name (Last, First, Middle Initial) C. Mr. James D. Fitzgerald		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2007
Mailing Address 4608 East 13th Avenue		Transaction ID: SA11A1.15237
City State Zip Code Spokane Valley WA 99212	Amount of Each Receipt this Period 45.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Spokane Transit Authority	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.68	

SUBTOTAL of Receipts This Page (optional) ▶	137.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 35
	<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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Ms Mary B. Fitzgerald		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2007	
Mailing Address 4608 E. 13th Avenue		Transaction ID: SA11A1.15238	
City State Zip Code Spokane Valley WA 99212-6360	Amount of Each Receipt this Period 48.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Spokane Transit Authority	Occupation transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 328.00		

Full Name (Last, First, Middle Initial) B. Mr. John Franchino		Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2007	
Mailing Address 8751 Stanwell Street		Transaction ID: SA11A1.15239	
City State Zip Code San Diego CA 92126-3211	Amount of Each Receipt this Period 39.00		
FEC ID number of contributing federal political committee. C			
Name of Employer ATC Vancom Inc. of California	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00		

Full Name (Last, First, Middle Initial) C. Joseph D. Gaudette		Date of Receipt M M / D D / Y Y Y Y 07 / 19 / 2007	
Mailing Address 67 Old Thompson Road		Transaction ID: SA11A1.15235	
City State Zip Code Buxton ME 04093	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Greater Portland Transit Dist.	Occupation Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

SUBTOTAL of Receipts This Page (optional) ▶	127.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 35						
	(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

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NAME OF COMMITTEE (In Full)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Sandra G. Huff		Date of Receipt M M / D D / Y Y Y Y Y 07 / 05 / 2007	
Mailing Address P.O. Box 952		Transaction ID: SA11A1.15224	
City State Zip Code Seattle WA 98111		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer King County DOT-Metro Transit		Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms Regina D. Jackson		Date of Receipt M M / D D / Y Y Y Y Y 07 / 05 / 2007	
Mailing Address P.O. Box 1138		Transaction ID: SA11A1.15231	
City State Zip Code Maple Valley WA 98038		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer King County DOT-Metro Transit		Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Robert L. Jackson, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 07 / 05 / 2007	
Mailing Address 10042 Ravenna Avenue NE		Transaction ID: SA11A1.15214	
City State Zip Code Seattle WA 98125-7742		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			
Name of Employer King county DOT		Occupation transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	140.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Mr. Jerry L. Jacobs		Date of Receipt MM / DD / YYYY 07 / 05 / 2007
Mailing Address 2112 North 41st		Transaction ID: SA11A1.15220
City Seattle	State WA	Zip Code 98103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Darrell Jefferson		Date of Receipt MM / DD / YYYY 07 / 08 / 2007
Mailing Address 545 E. 50th Street		Transaction ID: SA11A1.15201
City Chicago	State IL	Zip Code 60615
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Chicago Transit Authority	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mr. Richard W. Johnson		Date of Receipt MM / DD / YYYY 07 / 13 / 2007
Mailing Address 15833 West Carrabean Lane		Transaction ID: SA11A1.15241
City Surprise	State AZ	Zip Code 85379
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90.00
Name of Employer ATC Phoenix Transit Nec.	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

SUBTOTAL of Receipts This Page (optional)	▶	190.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 35
	<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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Anthony L. Jones		Date of Receipt MM / DD / YYYY 07 / 08 / 2007
Mailing Address 22061 Scott Drive		Transaction ID: SA11A1.15202
City Richton Park	State IL	Zip Code 60471
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer Chicago Transit Authority	Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. John C. Jordon		Date of Receipt MM / DD / YYYY 07 / 05 / 2007
Mailing Address P.O. Box 2292		Transaction ID: SA11A1.15203
City Hollister	State CA	Zip Code 95024
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Santa Clara Vly Transit Auth.	Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mr. Paul Kaplan		Date of Receipt MM / DD / YYYY 07 / 24 / 2007
Mailing Address P.O. Box 2561		Transaction ID: SA11A1.15246
City Boca Raton	State FL	Zip Code 33427
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 80.00	
Name of Employer Palm Tran, Inc.	Occupation transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional)	▶	380.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 35
	<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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Mr. Jerry L. Kleiboeker		Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2007
Mailing Address 5015 Comanche #L		Transaction ID: SA11A1.15240
City State Zip Code La Mesa CA 91941	Amount of Each Receipt this Period 63.00	
FEC ID number of contributing federal political committee. C		
Name of Employer ATC Vancon Inc. of California	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00	

Full Name (Last, First, Middle Initial) B. Mr. Ralph T. Klugh		Date of Receipt M M / D D / Y Y Y Y 07 / 12 / 2007
Mailing Address 3418 Cedar Glen Drive		Transaction ID: SA11A1.15199
City State Zip Code Allison Park PA 15101	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Port Athoroiy of Alleghe-ny	Occupation transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

Full Name (Last, First, Middle Initial) C. Mr. Kenneth Mc Cormick		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2007
Mailing Address P.O. Box 4156		Transaction ID: SA11A1.15216
City State Zip Code Seattle WA 98194	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County DOT, Metro Tr-ansit	Occupation transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional) ▶	148.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 35
	<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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Mr. James L. Mc Cubbin		Date of Receipt M M / D D / Y Y Y Y 07 / 13 / 2007
Mailing Address P.O. Box 56516		Transaction ID: SA11A1.15242
City State Zip Code Phoenix AZ 85079-6516	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		
Name of Employer ATC Phoenix Transit	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) B. Booker T. McKinion		Date of Receipt M M / D D / Y Y Y Y 07 / 05 / 2007
Mailing Address 3862 Renton Avenue South		Transaction ID: SA11A1.15219
City State Zip Code Seattle WA 98108	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County DOT-Metro Transit	Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Raymond B. Messier		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2007
Mailing Address 2696 Barndance Lane		Transaction ID: SA11A1.15244
City State Zip Code Santa Rosa CA 95407	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Golden Gate Bridge Highway Tra	Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	160.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 35
	<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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Mr. Wes R. Moorehead		Date of Receipt M M / D D / Y Y Y Y 07 / 05 / 2007
Mailing Address P.O. Box 3011		Transaction ID: SA11A1.15223
City State Zip Code Kent WA 98032-0201	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Mr. John C. Munro		Date of Receipt M M / D D / Y Y Y Y 07 / 05 / 2007
Mailing Address 5726 145th Place, SW		Transaction ID: SA11A1.15211
City State Zip Code Edmonds WA 98026-3729	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mr. Paul B. Neil		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2007
Mailing Address 1701 157th Avenue NE #A101		Transaction ID: SA11A1.15217
City State Zip Code Bellevue WA 98008-2777	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County Metro Transit	Occupation Transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional) ▶	150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 35
	<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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Mr. Lance F. Norton		Date of Receipt M M / D D / Y Y Y Y Y 07 / 18 / 2007
Mailing Address 3529 158th SW		Transaction ID: SA11A1.15212
City State Zip Code Lynwood WA 98037-1415	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Daniel G. Rodriguez, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2007
Mailing Address 209 Ray Avenue		Transaction ID: SA11A1.15234
City State Zip Code San Antonio TX 78204	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		
Name of Employer VIA Metro Transit Authority	Occupation transit opertor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) C. Mr. John W. Sepolen		Date of Receipt M M / D D / Y Y Y Y Y 07 / 05 / 2007
Mailing Address 2401 SW Holden Street #Q107		Transaction ID: SA11A1.15218
City State Zip Code Seattle WA 98034	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	125.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 35
	<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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Mr. Jerold Shaff		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2007	
Mailing Address 196 Country Manor West		Transaction ID: SA11A1.15206	
City State Zip Code Webster NY 14580-3383	Amount of Each Receipt this Period 140.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Liftline, Inc.	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Matthew J. Shaw, Sr.		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2007	
Mailing Address 553 Gansz Road		Transaction ID: SA11A1.15205	
City State Zip Code Lyons NY 14489	Amount of Each Receipt this Period 105.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Liftline, Inc.	Occupation Transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. John Stroud		Date of Receipt M M / D D / Y Y Y Y 07 / 05 / 2007	
Mailing Address 525 28th Avenue South		Transaction ID: SA11A1.15226	
City State Zip Code Seattle WA 98144	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer King County DOT-Metro Transit	Occupation operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	295.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 35
	<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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Mr. Mark P. Tambellini		Date of Receipt M M / D D / Y Y Y Y 07 / 12 / 2007
Mailing Address 943 Fairfield Lane		Transaction ID: SA11A1.15198
City State Zip Code McDonald PA 15057	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer PAT Transit Allegheny Co.	Occupation transit employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Michael J. Teeter		Date of Receipt M M / D D / Y Y Y Y 07 / 05 / 2007
Mailing Address 1715 SW Trenton Street		Transaction ID: SA11A1.15230
City State Zip Code Seattle WA 98106	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County DOT-Metro Transit	Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Jimmy O. Vann		Date of Receipt M M / D D / Y Y Y Y 07 / 05 / 2007
Mailing Address 2353 Martin Luther King Jr Way		Transaction ID: SA11A1.15229
City State Zip Code Tacoma WA 98405	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County DOT-Metro Transit	Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	130.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 35
	<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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Ms Deeann K. Wakenight		Date of Receipt M M / D D / Y Y Y Y 07 / 05 / 2007	
Mailing Address 4155 12th Avenue South		Transaction ID: SA11A1.15221	
City State Zip Code Seattle WA 98108-1413	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C			
Name of Employer King County Metro Transit	Occupation Transit Employee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) B. Mr. Jerry Wallace, III		Date of Receipt M M / D D / Y Y Y Y 07 / 05 / 2007	
Mailing Address 7706 37th Avenue South		Transaction ID: SA11A1.15213	
City State Zip Code Seattle WA 98118-4008	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C			
Name of Employer King County Metro Transit	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) C. Mr. Craig D. Whitehead		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2007	
Mailing Address 1803 Andina Avenue #14		Transaction ID: SA11A1.15233	
City State Zip Code Cincinnati OH 45237	Amount of Each Receipt this Period 45.00		
FEC ID number of contributing federal political committee. C			
Name of Employer SW Ohio Regional Transit Ath	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00		

SUBTOTAL of Receipts This Page (optional) ▶	115.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 35
	<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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Chris W. Wick		Date of Receipt M M / D D / Y Y Y Y Y 07 / 05 / 2007	
Mailing Address 10525 SE 250th Place #G-103		Transaction ID: SA11A1.15228	
City State Zip Code Kent WA 98030		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer King County DOT-Metro Transit		Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms Kelly R. Wickham		Date of Receipt M M / D D / Y Y Y Y Y 07 / 05 / 2007	
Mailing Address 6706 North Van De Car Road, SE		Transaction ID: SA11A1.15227	
City State Zip Code Port Orchard WA 98367		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer King County Metro Transit		Occupation Transit worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Jimmy Williams		Date of Receipt M M / D D / Y Y Y Y Y 07 / 05 / 2007	
Mailing Address 215 31st Avenue S.		Transaction ID: SA11A1.15232	
City State Zip Code Seattle WA 98144		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer King County DOT		Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 35
	(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

Full Name (Last, First, Middle Initial) A. Ms Yvonne M. Williams		Date of Receipt M M / D D / Y Y Y Y Y 07 / 06 / 2007	
Mailing Address 2475 60th Avenue		Transaction ID: SA11A1.15200	
City State Zip Code Oakland CA 94605	Amount of Each Receipt this Period 45.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Alameda-Contra Costa Trans Dis	Occupation transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) B. Mr. Anthony R. Withington		Date of Receipt M M / D D / Y Y Y Y Y 07 / 14 / 2007	
Mailing Address 5817 Blank Road		Transaction ID: SA11A1.15243	
City State Zip Code Sebastopol CA 95472-6115	Amount of Each Receipt this Period 42.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Golden Gate Bridge Hwy Tr. Dist.	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00		

SUBTOTAL of Receipts This Page (optional) ▶	87.00
TOTAL This Period (last page this line number only) ▶	3294.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 22 / 35	
	(check only one)			
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMALGAMATED TRANSIT UNION-COPE

A. Full Name (Last, First, Middle Initial)
Citibank, F.S.B.

Mailing Address 5001 Wisconsin Avenue, N.W.

City State Zip Code
Washington DC 20016

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3073.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	1	/	2	0	0	7

Transaction ID: SA17.15265

Amount of Each Receipt this Period
427.66

SUBTOTAL of Receipts This Page (optional)	▶	427.66
TOTAL This Period (last page this line number only)	▶	427.66

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 23 / 35

<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

Full Name (Last, First, Middle Initial) A. COSTELLO FOR CONGRESS COMMITTEE		Transaction ID: SB23.15188
Mailing Address P O BOX 8250		Date of Disbursement MM / DD / YYYY 07 / 12 / 2007
City BELLEVILLE	State IL	Zip Code 62222
Purpose of Disbursement	Amount of Each Disbursement this Period 500.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 12		

Full Name (Last, First, Middle Initial) B. ENGEL FOR CONGRESS		Transaction ID: SB23.15192
Mailing Address 462 CALIFORNIA RD		Date of Disbursement MM / DD / YYYY 07 / 23 / 2007
City BRONXVILLE	State NY	Zip Code 10708
Purpose of Disbursement	Amount of Each Disbursement this Period 1000.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 17		

Full Name (Last, First, Middle Initial) C. GILLIBRAND FOR CONGRESS		Transaction ID: SB23.15197
Mailing Address P.O. Box 1279		Date of Disbursement MM / DD / YYYY 07 / 27 / 2007
City Hudson	State NY	Zip Code 12534
Purpose of Disbursement	Amount of Each Disbursement this Period 1000.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 20		

SUBTOTAL of Disbursements This Page (optional)	2500.00
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)

PAGE 24 / 35

<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

Full Name (Last, First, Middle Initial) A. LAMPSON FOR CONGRESS		Transaction ID: SB23.15187 Date of Disbursement 07 / 12 / 2007
Mailing Address P O BOX 21578		Amount of Each Disbursement this Period 1000.00
City BEAUMONT	State TX	
Zip Code 77720		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX District: 09		

Full Name (Last, First, Middle Initial) B. LATOURETTE FOR CONGRESS COMMITTEE		Transaction ID: SB23.15194 Date of Disbursement 07 / 23 / 2007
Mailing Address 1004 MILLRIDGE RD		Amount of Each Disbursement this Period 2500.00
City HIGHLAND HTS	State OH	
Zip Code 44143		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 19		

Full Name (Last, First, Middle Initial) C. MASS PAC		Transaction ID: SB23.15195 Date of Disbursement 07 / 23 / 2007
Mailing Address PO BOX 440324		Amount of Each Disbursement this Period 2500.00
City SOMERVILLE	State MA	
Zip Code 02144		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: Other		

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
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)

PAGE 25 / 35

<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)
PEOPLE FOR PATTY MURRAY

Mailing Address PO BOX 3662

City SEATTLE State WA Zip Code 98199

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: WA District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.15193

Date of Disbursement

07 / 23 / 2007

Amount of Each Disbursement this Period

3000.00

B. Full Name (Last, First, Middle Initial)
SECURE PAC

Mailing Address PO BOX 675

City BOLTON State MS Zip Code 39041

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB23.15190

Date of Disbursement

07 / 23 / 2007

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
TIM BISHOP FOR CONGRESS

Mailing Address 129 WOOLEY STREET

City SOUTHAMPTON State NY Zip Code 11968

Purpose of Disbursement

Candidate Name

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

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.15189

Date of Disbursement

07 / 18 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

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)
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) A. Adrienne for Edmonds City Council		Transaction ID: SB29.15166 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address 23632 Highway 99, #F PMB 196		Amount of Each Disbursement this Period 500.00
City Edmonds State WA Zip Code 98026	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Bruce Harrell for City Council		Transaction ID: SB29.15164 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 21208		Amount of Each Disbursement this Period 700.00
City Seattle State WA Zip Code 98111	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Chris Eggen for City Council		Transaction ID: SB29.15158 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address 18836 Aurora Avenue N.		Amount of Each Disbursement this Period 500.00
City Shoreline State WA Zip Code 98133	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1700.00
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)

PAGE 27 / 35

<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

Full Name (Last, First, Middle Initial) A. Committee to Elect Bill Sherman		Transaction ID: SB29.15170 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 25896		Amount of Each Disbursement this Period 250.00
City Seattle State WA Zip Code 98165	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Committee to Elect Joe Billerman		Transaction ID: SB29.15185 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 7
Mailing Address 232 Legends Creek Place, #103		Amount of Each Disbursement this Period 500.00
City Indianapolis State IN Zip Code 46229	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Don Persson for City Council		Transaction ID: SB29.15181 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address 538 Renton Avenue S		Amount of Each Disbursement this Period 250.00
City Renton State WA Zip Code 98055	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
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)

PAGE 28 / 35

<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

Full Name (Last, First, Middle Initial) A. Elect Stuebing		Transaction ID: SB29.15160 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 31258		Amount of Each Disbursement this Period 250.00
City Seattle State WA Zip Code 98103	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Friends for Electing Neal Safrin		Transaction ID: SB29.15183 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address 5451 NE 203rd Place		Amount of Each Disbursement this Period 1000.00
City Lake Forest State WA Zip Code 98155	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Friends of John Chelminiak		Transaction ID: SB29.15144 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 1391		Amount of Each Disbursement this Period 250.00
City Bellevue State WA Zip Code 98009	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1500.00
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)

PAGE 29 / 35

<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

Full Name (Last, First, Middle Initial) A. Friends of Keith Scully		Transaction ID: SB29.15172 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 3134		Amount of Each Disbursement this Period 250.00
City Seattle State WA Zip Code 98114	Purpose of Disbursement Non federal contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Friends of Mark Divecchio		Transaction ID: SB29.15137 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 6 / 2 0 0 7
Mailing Address 4735 Parkwood Drive		Amount of Each Disbursement this Period 1000.00
City Erie State PA Zip Code 16510	Purpose of Disbursement Non federal contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Jean Godden for Reelection		Transaction ID: SB29.15146 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 21522		Amount of Each Disbursement this Period 700.00
City Seattle State WA Zip Code 98111	Purpose of Disbursement Non federal contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1950.00
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)

PAGE 30 / 35

<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

Full Name (Last, First, Middle Initial) A. Jessica Greenway for City Council		Transaction ID: SB29.15179 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address 110 15th Avenue		Amount of Each Disbursement this Period 250.00
City Kirkland State WA Zip Code 98033	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Kathleen Keene for Burien City Council		Transaction ID: SB29.15174 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address 14208 6th Avenue S		Amount of Each Disbursement this Period 250.00
City Burien State WA Zip Code 98168	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Markosek for State Legislature		Transaction ID: SB29.15139 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 7
Mailing Address 207 Glenwood		Amount of Each Disbursement this Period 2000.00
City Monroeville State PA Zip Code 15146	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
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 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

Full Name (Last, First, Middle Initial) A. People for Brian Hatfield		Transaction ID: SB29.15168 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address 226 Fir Street		Amount of Each Disbursement this Period 500.00
City Raymond State WA Zip Code 98577	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. People for Keri Andrews		Transaction ID: SB29.15142 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 6309		Amount of Each Disbursement this Period 250.00
City Bellvue State WA Zip Code 98008	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. People for Sally Clark		Transaction ID: SB29.15148 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 2041		Amount of Each Disbursement this Period 250.00
City Seattle State WA Zip Code 98111	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
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 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

Full Name (Last, First, Middle Initial) A. Re-elect David Della		Transaction ID: SB29.15150 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 22088		Amount of Each Disbursement this Period 500.00
City Seattle State WA Zip Code 98122	Purpose of Disbursement Non federal contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Re-elect Hildreth for Mayor		Transaction ID: SB29.15177 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address 312 3rd Avenue SE		Amount of Each Disbursement this Period 250.00
City Pacific State WA Zip Code 98047	Purpose of Disbursement Non federal contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Reelect Richard Marin		Transaction ID: SB29.15154 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address 18918 80th Avenue W.		Amount of Each Disbursement this Period 300.00
City Edmonds State WA Zip Code 98026	Purpose of Disbursement Non federal contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1050.00
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 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

Full Name (Last, First, Middle Initial) A. Reelect Tom Rasmussen		Transaction ID: SB29.15152 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 4647		Amount of Each Disbursement this Period 250.00
City Seattle State WA Zip Code 98194	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Scott Noble for Assessor		Transaction ID: SB29.15156 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address 2700 4th Avenue #301		Amount of Each Disbursement this Period 500.00
City Seattle State WA Zip Code 98121	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Soriano for School District Position 1		Transaction ID: SB29.15162 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 7
Mailing Address 14051 1st Avenue NW		Amount of Each Disbursement this Period 250.00
City Seattle State WA Zip Code 98177	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
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)

PAGE 34 / 35

<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)
Stephen Lamphear for Burien City Council

Transaction ID: SB29.15140

Date of Disbursement

Mailing Address 12011-18th SW

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	0	7

City Burien State WA Zip Code 98146

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Non federal contribution

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

250.00

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

11950.00

Form/Schedule: **F3XN**
Transaction ID:

The unitemized total of \$56,859.65 represents the total contributions from individuals who have not individually contributed more than \$200 in the aggregate during the calendar year.