

**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

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

ADDRESS (number and street)

501 3rd St NW

Check if different  
than previously  
reported. (ACC)

Washington

DC

20001

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00002089

3. IS THIS  
REPORTNEW  
(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

01

01

2010

through

01

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Jeffrey Rechenbach

Signature of Treasurer

Electronically Filed by Jeffrey Rechenbach

Date

02

18

2010

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

Office  
Use  
Only**FEC FORM 3X**

(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 24

Write or Type Committee Name

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	3650708.78
(b) Cash on Hand at Beginning of Reporting Period .....	3650708.78	
(c) Total Receipts (from Line 19) .....	304863.47	304863.47
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	3955572.25	3955572.25
7. Total Disbursements (from Line 31) .....	133739.13	133739.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	3821833.12	3821833.12
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> 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**

FEC Form 3X (Rev. 06/2004)

3 / 24

Write or Type Committee Name

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Report Covering the Period:

From:

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

To:

M	M	D	D	Y	Y	Y	Y
0	1	3	1	2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	1018.66	1018.66
(ii) Unitemized .....	303531.18	303531.18
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	304549.84	304549.84
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	304549.84	304549.84
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	313.63	313.63
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)) .....	304863.47	304863.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	304863.47	304863.47

## DETAILED SUMMARY PAGE

of Disbursements

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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.....	21045.65	21045.65	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	21045.65	21045.65	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	49500.00	49500.00	
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.....	63193.48	63193.48	
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))..	133739.13	133739.13	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	133739.13	133739.13	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 24

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) .....	304549.84	304549.84
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	304549.84	304549.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	21045.65	21045.65
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	21045.65	21045.65

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

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

FOR LINE NUMBER: PAGE 6 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

ROSA BERNAL

Mailing Address 5306 SPRINGHILL DR

City

ANAHEIM HILLS

State

CA

Zip Code

92807-3716

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VERIZON-GTE OF CALIFORNIA

Occupation

SECY-TREAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.66

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 4 / 2 0 1 0

Transaction ID: C15348692

Amount of Each Receipt this Period

302.66

**B.**

Full Name (Last, First, Middle Initial)

TABITHA CASSETTA

Mailing Address PO BOX 1155

City

MILLBROOK

State

NY

Zip Code

12545-1155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VERIZON-BELL ATLANTIC NOR-  
TH

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 9 / 2 0 1 0

Transaction ID: C15283374

Amount of Each Receipt this Period

240.00

\* Payroll Deduction: \$60  
Weekly

**C.**

Full Name (Last, First, Middle Initial)

BRETT RICHTER

Mailing Address 509 BRASS CASTLE RD

City

OXFORD

State

NJ

Zip Code

07863-3148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NJ STATE EMPLOYEES ADMN  
CLERICAL

Occupation

CLERICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 4 / 2 0 1 0

Transaction ID: C15266009

Amount of Each Receipt this Period

259.00

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

801.66

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 24

(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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

DIRK STREIBEL

Mailing Address 320 FRANKLIN ST

City

LOCKPORT

State

IL

Zip Code

60441-2606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DERLAN PRECISION GEA

Occupation

Manufacturing

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

217.00

Date of Receipt

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

Transaction ID: C15352379

Amount of Each Receipt this Period

217.00

\* Payroll Deduction: \$62  
Monthly

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

217.00

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

1018.66

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 24

(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

SunTrust Bank

Mailing Address P.O. Box 85024

City

Richmond

State

VA

Zip Code

23285-5024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

313.63

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	1	0

Transaction ID: C15359609

Amount of Each Receipt this Period

313.63

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

313.63

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

313.63



# **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 9 / 24

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

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NAME OF COMMITTEE (In Full)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Business Forms Inc.

Mailing Address 2325 Dulles Corner Blvd., Suite 50  
PO BOX 710929

City Herndon State VA Zip Code 20171

Purpose of Disbursement

Check Purchase

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D10110

Date of Disbursement

01 / 08 / 2010

Amount of Each Disbursement this Period

869.93

**B.**

Full Name (Last, First, Middle Initial)

Communications Workers of America

Mailing Address 501 Third Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement

Salary Reimbursement

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D10068

Date of Disbursement

01 / 08 / 2010

Amount of Each Disbursement this Period

12675.57

**C.**

Full Name (Last, First, Middle Initial)

Laurence E Gold

Mailing Address 1666 Connecticut Avenue, NW  
5th Floor

City Washington State DC Zip Code 20009

Purpose of Disbursement

Legal Retainer Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D10081

Date of Disbursement

01 / 08 / 2010

Amount of Each Disbursement this Period

1461.45

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

15006.95

**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 10 / 24

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

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NAME OF COMMITTEE (In Full)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) NGP Software, Inc.	<b>Transaction ID:</b> D10089 <b>Date of Disbursement</b>																				
Mailing Address 1225 Eye Street, NW, Suite 1225	<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>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	1	0												
City Washington State DC Zip Code 20005	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement FEC Reporting Software Candidate Name	<table border="1"> <tr> <td colspan="10">2250.00</td> </tr> </table>	2250.00																			
2250.00																					
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Public Affairs Support Services	<b>Transaction ID:</b> D10080 <b>Date of Disbursement</b>																				
Mailing Address 1020 North Fairfax Street Fifth Floor	<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>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	1	0												
City Alexandria State VA Zip Code 22314	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CWA-COPE Compliance Review Candidate Name	<table border="1"> <tr> <td colspan="10">2860.31</td> </tr> </table>	2860.31																			
2860.31																					
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) SunTrust Bank	<b>Transaction ID:</b> D10108 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 85024	<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>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	1		2	0	1	0												
City Richmond State VA Zip Code 23285-5024	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Merchant Fees Candidate Name	<table border="1"> <tr> <td colspan="10">35.24</td> </tr> </table>	35.24																			
35.24																					
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) .....

**5145.55**

**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 11 / 24

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

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NAME OF COMMITTEE (In Full)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SunTrust Bank

Mailing Address P.O. Box 85024

City  
Richmond

State  
VA

Zip Code  
23285-5024

Purpose of Disbursement  
Account Analysis Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D10109

Date of Disbursement

01 / 22 / 2010

Amount of Each Disbursement this Period

858.15

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

858.15

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

21010.65

# **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 12 / 24

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

ARCURI FOR CONGRESS

Mailing Address P.O. Box 8508

City  
Utica

State  
NY

Zip Code  
13505

Purpose of Disbursement  
Federal Candidate Contribution 2010

Candidate Name  
Michael A Arcuri

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 24

Transaction ID: D10093

Date of Disbursement

01 / 27 / 2010

Amount of Each Disbursement this Period

3000.00

**B.**

Full Name (Last, First, Middle Initial)

BOSWELL FOR CONGRESS

Mailing Address PO BOX 6220

City  
Des Moines

State  
IA

Zip Code  
50309

Purpose of Disbursement  
Federal Candidate Contribution 2010

Candidate Name  
LEONARD L BOSWELL

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IA District: 03

Transaction ID: D10096

Date of Disbursement

01 / 27 / 2010

Amount of Each Disbursement this Period

3000.00

**C.**

Full Name (Last, First, Middle Initial)

BRALEY FOR CONGRESS

Mailing Address 300 Walnut Suite 5

City  
Des Moines

State  
IA

Zip Code  
50309

Purpose of Disbursement  
Federal Candidate Contribution 2010

Candidate Name  
Bruce L Braley

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IA District: 01

Transaction ID: D10099

Date of Disbursement

01 / 27 / 2010

Amount of Each Disbursement this Period

2000.00

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

8000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

CAMPAIGN FOR CHANGE

Mailing Address 202 Bonham Rd

City  
DedhamState  
MAZip Code  
02026Purpose of Disbursement  
Federal Committee Contribution 2010Candidate Name  
CAMPAIGN FOR CHANGEOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D10090

Date of Disbursement

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

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

COSTELLO FOR CONGRESS COMMITTEE

Mailing Address PO BOX 8250

City  
BELLEVILLEState  
ILZip Code  
62222Purpose of Disbursement  
Federal Candidate Contribution 2010Candidate Name  
JERRY F COSTELLOOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 12

Transaction ID: D10097

Date of Disbursement

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

Amount of Each Disbursement this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd FloorCity  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Federal Committee ContributionCandidate Name  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEEOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D10094

Date of Disbursement

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

Amount of Each Disbursement this Period

15000.00

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

20000.00

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)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DEMOCRATIC STATE CENTRAL COMMITTEE OF MARYLAND

Mailing Address 188 MAIN ST SUITE 1

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement  
Federal Committee Contribution

Candidate Name  
DEMOCRATIC STATE CENTRAL COMMITTEE OF MARYLAND

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D10091

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
01 / 25 / 2010

Amount of Each Disbursement this Period

4000.00

B.

Full Name (Last, First, Middle Initial)

Franken Recount Team

Mailing Address 255 East Plato Avenue

City Saint Paul State MN Zip Code 55124

Purpose of Disbursement  
Federal Candidate Contribution 2008

Candidate Name  
Franken Recount Team

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Runoff

Transaction ID: D10070

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
01 / 08 / 2010

Amount of Each Disbursement this Period

3000.00

C.

Full Name (Last, First, Middle Initial)

LOEBSACK FOR CONGRESS

Mailing Address PO Box 1457

City Iowa City State IA Zip Code 52244

Purpose of Disbursement  
Federal Candidate Contribution 2010

Candidate Name  
David Wayne Loebsack

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☒ Other (specify) ▼

State: IA District: 02

Transaction ID: D10095

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
01 / 27 / 2010

Amount of Each Disbursement this Period

1000.00

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

8000.00

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 15 / 24

<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

MALONEY FOR CONGRESS

Mailing Address 49 EAST 92ND STREET

City State Zip Code  
NEW YORK NY 10128

Purpose of Disbursement  
Federal Candidate Contribution 2010

Candidate Name  
CAROLYN B MALONEY

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NY District: 14

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D10084

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)

MARTHA COAKLEY FOR SENATE COMMITTEE

Mailing Address PO BOX 220 STATE HOUSE STATION

City State Zip Code  
Boston MA 02133

Purpose of Disbursement  
Federal Candidate Contribution 2010

Candidate Name  
MARTHA COAKLEY

Office Sought: ☐ House  
☒ Senate  
☐ President

State: MA District:

Disbursement For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼

Special

Transaction ID: D10071

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

MASSACHUSETTS DEMOCRATIC STATE COMMITTEE-FED FUND

Mailing Address 56 ROLAND ST - NORTH LOBBY #203

City State Zip Code  
Charlestown MA 02129

Purpose of Disbursement  
Federal Committee Contribution 2010

Candidate Name  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE-FED FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D10082

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**11000.00**

**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)

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<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

YARMUTH FOR CONGRESS

Mailing Address 1815 Brownsboro Road, Ste. 100

City State Zip Code  
Louisville KY 40206

Purpose of Disbursement  
Federal Candidate Contribution 2010

Candidate Name  
John A Yarmuth

Office Sought: ☒ House  
☐ Senate  
☐ President

State: KY District: 03

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: D10085

Date of Disbursement

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

Amount of Each Disbursement this Period

2500.00

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

2500.00

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

49500.00



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

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

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(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BROWN FOR GOVERNOR 2010 EXPLORATORY COMMITTEE

Mailing Address 291 3RD STREET

City  
Oakland

State  
CA

Zip Code  
94607

Purpose of Disbursement  
Non-Federal Candidate Contrib 2010

Candidate Name  
BROWN FOR GOVERNOR 2010 EXPLORATORY COMMITTEE

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D10072

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10000.00

B.

Full Name (Last, First, Middle Initial)

CBC INSTITUTE

Mailing Address 455 MASSACHUSETTS AVENUE  
 SUITE 355

City  
WASHINGTON

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Non-Federal Committee Contrib 2010

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D10087

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10000.00

C.

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT MARC GERGELY

Mailing Address 1985 LINCOLN WAY, STE. 23-314

City  
McKeesport

State  
PA

Zip Code  
15131

Purpose of Disbursement  
Non-Federal Candidate Contrib 2010

Candidate Name  
Marc Gergely

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District:

Transaction ID: D10086

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

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

20250.00

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)

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<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Communications Workers of America

Mailing Address 501 Third Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Transfer of Mistaken Dues Deposit

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D10103

Date of Disbursement

01 / 07 / 2010

Amount of Each Disbursement this Period

210.42

Orig Unitem Depo 12/09

**B.** Full Name (Last, First, Middle Initial)  
Communications Workers of America

Mailing Address 501 Third Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Transfer of Mistaken Dues Deposit

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D10104

Date of Disbursement

01 / 07 / 2010

Amount of Each Disbursement this Period

355.15

Orig Unitem Depo 12/09

**C.** Full Name (Last, First, Middle Initial)  
Communications Workers of America

Mailing Address 501 Third Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Transfer of Mistaken Dues Deposit

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D10105

Date of Disbursement

01 / 07 / 2010

Amount of Each Disbursement this Period

525.95

Orig Unitem Depo 12/09

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

1091.52

**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

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(check only one)

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<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Communications Workers of America

Mailing Address 501 Third Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Transfer of Mistaken Dues Deposit

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D10106

Date of Disbursement

01 / 07 / 2010

Amount of Each Disbursement this Period

2496.88

Orig Unitem Depo 12/09

**B.** Full Name (Last, First, Middle Initial)  
Communications Workers of America

Mailing Address 501 Third Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Transfer of Mistaken Dues Deposit

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D10107

Date of Disbursement

01 / 07 / 2010

Amount of Each Disbursement this Period

2666.50

Orig Unitem Depo 12/09

**C.** Full Name (Last, First, Middle Initial)  
CWA ARIZONA STATE COUNCIL PAC

Mailing Address 5818 N 7th St, Suite 204

City Phoenix State AZ Zip Code 85014-5811

Purpose of Disbursement  
Non-Federal Committee Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D10159

Date of Disbursement

01 / 14 / 2010

Amount of Each Disbursement this Period

5000.00

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

10163.38

**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 20 / 24

<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) CWA COPE - VA	<b>Transaction ID:</b> D10074 <b>Date of Disbursement</b>																				
Mailing Address 501 Third Street, NW	<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>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	1	0												
City Washington State DC Zip Code 20001	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Non-Federal Committee Contrib 2010	<table border="1"> <tr> <td>6</td><td>5</td><td>8</td><td>8</td><td>.</td><td>5</td><td>8</td> </tr> </table>	6	5	8	8	.	5	8													
6	5	8	8	.	5	8															
Candidate Name CWA COPE - VA	<table border="1"> <tr> <td>0</td><td>1</td> </tr> </table> Category/ Type	0	1																		
0	1																				
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) CWA COPE - VA	<b>Transaction ID:</b> D10075 <b>Date of Disbursement</b>																				
Mailing Address 501 Third Street, NW	<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>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	5		2	0	1	0												
City Washington State DC Zip Code 20001	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Non-Federal Committee Contrib 2010	<table border="1"> <tr> <td>1</td><td>0</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	1	0	0	0	.	0	0													
1	0	0	0	.	0	0															
Candidate Name CWA COPE - VA	<table border="1"> <tr> <td>0</td><td>1</td> </tr> </table> Category/ Type	0	1																		
0	1																				
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) CWA District 2 PEC - WV	<b>Transaction ID:</b> D10069 <b>Date of Disbursement</b>																				
Mailing Address 962 Wayne Ave., Suite 500	<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>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	1	0												
City Silver Spring State MD Zip Code 20910	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Non-Federal Committee Contrib 2010	<table border="1"> <tr> <td>5</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	5	0	0	.	0	0														
5	0	0	.	0	0																
Candidate Name CWA District 2 PEC - WV	<table border="1"> <tr> <td>0</td><td>1</td> </tr> </table> Category/ Type	0	1																		
0	1																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

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

8088.58

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

<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

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

01 / 08 / 2010

5750.00

State:  District:

350.00

State:  District:

Three 7-segment displays showing the date 01/08/2010 in MMDDYY format. The first display shows '01' with 'M' above the left and right segments. The second display shows '08' with 'D' above the left and right segments. The third display shows '2010' with 'Y' above each of the four segments.

2000.00

State: AR District:

2006 Primary Debt Reduction

**8100.00**

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **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 22 / 24

<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Halter for Arkansas	<b>Transaction ID:</b> D10111 <b>Date of Disbursement</b>																				
Mailing Address PO Box 94399	<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>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	1	0												
City North Little Rock State AR Zip Code 72109	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Non-Federal Candidate Contrib	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Bill Halter	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: AR District: 2006 General Debt Re	2006 General Debt Reducti																				
<b>B.</b> Full Name (Last, First, Middle Initial) Halter for Arkansas	<b>Transaction ID:</b> D10112 <b>Date of Disbursement</b>																				
Mailing Address PO Box 94399	<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>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	1	0												
City North Little Rock State AR Zip Code 72109	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Non-Federal Candidate Contrib	<table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name Bill Halter	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: AR District: 2006 Run-Off Debt Re	2006 Run-Off Debt Reducti																				
<b>C.</b> Full Name (Last, First, Middle Initial) Halter for Arkansas	<b>Transaction ID:</b> D10113 <b>Date of Disbursement</b>																				
Mailing Address PO Box 94399	<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>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	1	0												
City North Little Rock State AR Zip Code 72109	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Non-Federal Candidate Contribution	<table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name Bill Halter	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AR District:																					
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																			
5000.00																					
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"> <tr> <td></td> </tr> </table>																				

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 24

<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Halter for Arkansas

Mailing Address PO Box 94399

City  
North Little Rock

State  
AR

Zip Code  
72109

Purpose of Disbursement  
Non-Federal Candidate Contribution

Candidate Name  
Bill Halter

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AR District:

Transaction ID: D10114

Date of Disbursement

01 / 08 / 2010

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL ALLEN FOR ASSEMBLY 2010

Mailing Address PO BO 4870

City  
Santa Rosa

State  
CA

Zip Code  
95402

Purpose of Disbursement  
Non-Federal Candidate Contrib 2010

Candidate Name  
MICHAEL ALLEN

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District:

Transaction ID: D10073

Date of Disbursement

01 / 08 / 2010

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

The Committee to Elect David Coss for Mayor

Mailing Address PO Box 4573

City  
Santa Fe

State  
NM

Zip Code  
87502

Purpose of Disbursement  
Federal Candidate Contribution 2010

Candidate Name  
David Coss

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NM District:

Transaction ID: D10098

Date of Disbursement

01 / 08 / 2010

Amount of Each Disbursement this Period

2500.00

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

5500.00

**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 / 24

<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Women's Policy, Inc.

Mailing Address 409 12th Street, SW, Suite 310

City  
Washington

State  
DC

Zip Code  
20024

Purpose of Disbursement  
Non-Federal Committee Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D10079

Date of Disbursement

01 / 12 / 2010

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Young Democrats of America

Mailing Address PO BOX 77496

City  
Washington

State  
DC

Zip Code  
20013

Purpose of Disbursement  
Non-Federal Committee Contrib 2010

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D10083

Date of Disbursement

01 / 25 / 2010

Amount of Each Disbursement this Period

2500.00

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

5000.00

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

63193.48