

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

**SEIU COPE (Service Employees International Union Committee On Political Education)**

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

3. IS THIS REPORT  **NEW (N)** OR  **AMENDED (A)**

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

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

(c) 12-Day **PRE-Election** Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on  /  /  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  /  /  through  /  /

/  /  through  /  /

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 Michael P. Fishman

Signature of Treasurer Michael P. Fishman [Electronically Filed] Date  /  /

/  /

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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**SEIU COPE (Service Employees International Union Committee On Political Education)**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		14185041.74
(b) Cash on Hand at Beginning of Reporting Period.....	14578865.65	
(c) Total Receipts (from Line 19) .....	2398657.18	4745349.71
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	16977522.83	18930391.45
7. Total Disbursements (from Line 31).....	658695.35	2611563.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	16318827.48	16318827.48
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) .....	294466.59	

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

**SEIU COPE (Service Employees International Union Committee On Political Education)**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1112.00	1314.00
(ii) Unitemized .....	2383729.28	4708974.56
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2384841.28	4710288.56
(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) .....	2384841.28	4710288.56
12. Transfers From Affiliated/Other Party Committees.....	11583.82	27829.07
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).....	2232.08	2232.08
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	5000.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	2398657.18	4745349.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2398657.18	4745349.71

**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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	70865.90	383277.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	70865.90	383277.31
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17500.00	17500.00
24. Independent Expenditures (use Schedule E) .....	0.00	20000.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	570329.45	2190786.66
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	658695.35	2611563.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	658695.35	2611563.97

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2384841.28	4710288.56
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2384841.28	4710288.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	70865.90	383277.31
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2232.08	2232.08
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	68633.82	381045.23

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 27
<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

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

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

**A. Kirk Adams**  
Full Name (Last, First, Middle Initial)  
Mailing Address 325 W 86th Street #309  
City New York State NY Zip Code 10024  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SEIU Occupation Executive Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 24 / 2015  
**Transaction ID : C6803702**  
Amount of Each Receipt this Period 200.00  
\* Payroll Deduction: \$100.00 Bi-Weekly

**B. Thomas Balanoff**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1156 Ridgewood Drive  
City Highland Park State IL Zip Code 60035  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SEIU Local 1 Occupation Int'l Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 27 / 2015  
**Transaction ID : C6805101**  
Amount of Each Receipt this Period 150.00  
\* Payroll Deduction: \$75.00 Bi-Weekly

**C. Christine Basua**  
Full Name (Last, First, Middle Initial)  
Mailing Address 449 W Santa Barbara St  
City Santa Paula State CA Zip Code 93060  
FEC ID number of contributing federal political committee. **C**  
Name of Employer County of Ventura Occupation Human Services Employment Specialist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 02 / 25 / 2015  
**Transaction ID : C6806540**  
Amount of Each Receipt this Period 120.00  
\* Payroll Deduction: \$60.00 Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	470.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<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

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

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

**A. Nancy E Cross**  
Full Name (Last, First, Middle Initial)

Mailing Address 604 Hinman Ave  
# 32

City Evanston State IL Zip Code 60202-3078

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

Name of Employer SEIU Local 1 Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
02 / 27 / 2015  
Transaction ID : C6805113

Amount of Each Receipt this Period  
130.00

\* Payroll Deduction: \$65.00 Bi-Weekly

**B. Mary Kay Henry**  
Full Name (Last, First, Middle Initial)

Mailing Address 1519 12th St NW

City Washington State DC Zip Code 20005-4433

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

Name of Employer SEIU Occupation International President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
404.00

Date of Receipt  
02 / 24 / 2015  
Transaction ID : C6803595

Amount of Each Receipt this Period  
202.00

\* Payroll Deduction: \$101.00 Bi-Weekly

**C. Ronald McMullen**  
Full Name (Last, First, Middle Initial)

Mailing Address 11152 Orion Ave

City Mission Hills State CA Zip Code 91345

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

Name of Employer County of Los Angeles Occupation Case Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
02 / 25 / 2015  
Transaction ID : C6806371

Amount of Each Receipt this Period  
150.00

\* Payroll Deduction: \$75.00 Semi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	482.00
<b>TOTAL</b> 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 8 OF 27  
(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

**A. Martha Lea Voland**  
Full Name (Last, First, Middle Initial)  
Mailing Address 28 Hammond St  
City Portland State ME Zip Code 04101  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SEIU Occupation LEAD Program Coordinator  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 320.00

Date of Receipt 02 / 24 / 2015  
**Transaction ID : C6803717**  
Amount of Each Receipt this Period 160.00  
\* Payroll Deduction: \$80.00 Bi-Weekly

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	160.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1112.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial) <b>A. Workers United for Political Power Campaign Comm.</b>		Date of Receipt
Mailing Address 31 WEST 15TH STREET 3RD FLOOR POLITICAL DEPARTMENT		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2015"/>
City NEW YORK	State NY	Zip Code 10011
FEC ID number of contributing federal political committee. <b>C</b> C00462044		<b>Transaction ID : C6794778</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 27829.07	<input type="text" value="35.00"/>
		Transfer

Full Name (Last, First, Middle Initial) <b>B. Workers United for Political Power Campaign Comm.</b>		Date of Receipt
Mailing Address 31 WEST 15TH STREET 3RD FLOOR POLITICAL DEPARTMENT		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2015"/>
City NEW YORK	State NY	Zip Code 10011
FEC ID number of contributing federal political committee. <b>C</b> C00462044		<b>Transaction ID : C6794779</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 27829.07	<input type="text" value="3294.08"/>
		Transfer

Full Name (Last, First, Middle Initial) <b>C. Workers United for Political Power Campaign Comm.</b>		Date of Receipt
Mailing Address 31 WEST 15TH STREET 3RD FLOOR POLITICAL DEPARTMENT		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2015"/>
City NEW YORK	State NY	Zip Code 10011
FEC ID number of contributing federal political committee. <b>C</b> C00462044		<b>Transaction ID : C6794780</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 27829.07	<input type="text" value="1633.95"/>
		Transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="4963.03"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial) <b>A. Workers United for Political Power Campaign Comm.</b>		Date of Receipt
Mailing Address 31 WEST 15TH STREET 3RD FLOOR POLITICAL DEPARTMENT		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2015"/>
City NEW YORK	State NY	Zip Code 10011
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00462044"/>		<b>Transaction ID : C6794781</b>
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="350.15"/>
Aggregate Year-to-Date ▼ <input type="text" value="27829.07"/>		Transfer

Full Name (Last, First, Middle Initial) <b>B. Workers United for Political Power Campaign Comm.</b>		Date of Receipt
Mailing Address 31 WEST 15TH STREET 3RD FLOOR POLITICAL DEPARTMENT		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2015"/>
City NEW YORK	State NY	Zip Code 10011
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00462044"/>		<b>Transaction ID : C6794782</b>
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="2616.52"/>
Aggregate Year-to-Date ▼ <input type="text" value="27829.07"/>		Transfer

Full Name (Last, First, Middle Initial) <b>C. Workers United for Political Power Campaign Comm.</b>		Date of Receipt
Mailing Address 31 WEST 15TH STREET 3RD FLOOR POLITICAL DEPARTMENT		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2015"/>
City NEW YORK	State NY	Zip Code 10011
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00462044"/>		<b>Transaction ID : C6794783</b>
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="242.12"/>
Aggregate Year-to-Date ▼ <input type="text" value="27829.07"/>		Transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="3208.79"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial) <b>A. Workers United for Political Power Campaign Comm.</b>		Date of Receipt
Mailing Address 31 WEST 15TH STREET 3RD FLOOR POLITICAL DEPARTMENT		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2015"/>
City NEW YORK	State NY	Zip Code 10011
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00462044"/>	<b>Transaction ID : C6794784</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="27829.07"/>	<input type="text" value="3444.50"/>
		Transfer

Full Name (Last, First, Middle Initial) <b>B. Workers United for Political Power Campaign Comm.</b>		Date of Receipt
Mailing Address 31 WEST 15TH STREET 3RD FLOOR POLITICAL DEPARTMENT		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2015"/>
City NEW YORK	State NY	Zip Code 10011
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00462044"/>	<b>Transaction ID : C6794785</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="27829.07"/>	<input type="text" value="67.50"/>
		Transfer

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text"/>	Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="3412.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="11583.82"/>

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

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

FOR LINE NUMBER: PAGE 12 OF 27  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

**A. Shorr Johnson Magnus Strategic Media**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1831 Chestnut St 6th Flr  
City Philadelphia State PA Zip Code 19103  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 2232.08

Date of Receipt  
MM / DD / YYYY  
02 / 03 / 2015  
**Transaction ID : C6797895**  
Amount of Each Receipt this Period  
2232.08  
Refund

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2232.08
<b>TOTAL</b> This Period (last page this line number only).....▶	2232.08

**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 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

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

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Civis Analytics Inc**

Mailing Address PO Box 4042

City Chicago State IL Zip Code 60654

Purpose of Disbursement  
Software Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2015

**Transaction ID : D354548**

Amount of Each Disbursement this Period

70000.00

Full Name (Last, First, Middle Initial)

**B. Wells Fargo Bank, NA**

Mailing Address 1753 Pinnacle Drive

City Mc Lean State VA Zip Code 22102

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2015

**Transaction ID : D354144**

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Wells Fargo Bank, NA**

Mailing Address 1753 Pinnacle Drive

City Mc Lean State VA Zip Code 22102

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2015

**Transaction ID : D354145**

Amount of Each Disbursement this Period

7.95

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

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

70047.95

**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 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

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

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Wells Fargo Bank, NA**

Mailing Address 1753 Pinnacle Drive

City State Zip Code  
Mc Lean VA 22102

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2015

**Transaction ID : D354149**

Amount of Each Disbursement this Period

744.90

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

744.90

70792.85

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. BOB BRADY FOR CONGRESS**

Mailing Address 12518 CHILTON ROAD

City Philadelphia State PA Zip Code 19154

Purpose of Disbursement  
Contribution

Candidate Name

**Bob Brady**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2015

**Transaction ID : D354503**

Amount of Each Disbursement this Period

5,000.00
----------

Full Name (Last, First, Middle Initial)

**B. FATTAH FOR CONGRESS**

Mailing Address 3900 Ford Road Suite 120

City Philadelphia State PA Zip Code 19131

Purpose of Disbursement  
Contribution

Candidate Name

**Chaka Fattah**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2015

**Transaction ID : D354502**

Amount of Each Disbursement this Period

5,000.00
----------

Full Name (Last, First, Middle Initial)

**C. STEVE ISRAEL FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 1400

City Melville State NY Zip Code 11747

Purpose of Disbursement  
Contribution

Candidate Name

**Steve Israel**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NY District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2015

**Transaction ID : D354151**

Amount of Each Disbursement this Period

2,500.00
----------

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

12500.00
----------

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

--

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. TRANSPORTATION TRADES DEPARTMENT AFL-CIO POLITICAL ACTION COMMITTEE (TTD/PAC)**

Mailing Address 815 16TH ST NW 4TH FLOOR

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2015

**Transaction ID : D354504**

Amount of Each Disbursement this Period

5000.00
---------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

--

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

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

5000.00
---------

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

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

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Arizona Families United for Strong Communities**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2015

Mailing Address 1802 E Thomas Rd  
#12

City Phoenix State AZ Zip Code 85016

**Transaction ID : D354549**

Purpose of Disbursement  
Non-Federal Contribution

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

4560.00
---------

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. LA City & County School Employees Union**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2015

Mailing Address 2724 W 8th St

City Los Angeles State CA Zip Code 90005

**Transaction ID : D354509**

Purpose of Disbursement  
Non-Federal Contribution

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

10000.00
----------

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Michigan Public Employees**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2015

Mailing Address 1026 E Michigan Ave

City Lansing State MI Zip Code 48912

**Transaction ID : D354506**

Purpose of Disbursement  
Non-Federal Contribution

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

5400.00
---------

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

19960.00
----------

**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

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

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. SEIU Local 221**

Mailing Address 4004 Kearny Mesa Rd

City San Diego State CA Zip Code 92111

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2015

**Transaction ID : D353957**

Amount of Each Disbursement this Period

4000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. SEIU Local 49 Committee on Political Education**

Mailing Address 3536 SE 26th Ave

City Portland State OR Zip Code 97202

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2015

**Transaction ID : D354505**

Amount of Each Disbursement this Period

124728.21

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. SEIU Local 509**

Mailing Address 400 Talcott Ave Bldg 131 2nd flr

City Watertown State MA Zip Code 02472

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2015

**Transaction ID : D354550**

Amount of Each Disbursement this Period

44657.00

Category/  
Type

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

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

173385.21

**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

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

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. SEIU Local USWW**

Mailing Address 828 W Washington Blvd

City Los Angeles State CA Zip Code 90015

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2015

**Transaction ID : D354507**

Amount of Each Disbursement this Period

10200.00

Full Name (Last, First, Middle Initial)

**B. SEIU United Healthcare Workers West**

Mailing Address 560 Thomas L Berkley Way

City Oakland State CA Zip Code 94612

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2015

**Transaction ID : D354501**

Amount of Each Disbursement this Period

326784.24

Full Name (Last, First, Middle Initial)

**C. United Long Term Care Workers**

Mailing Address 2910 Beverly Blvd

City Los Angeles State CA Zip Code 90057

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 19 / 2015

**Transaction ID : D354508**

Amount of Each Disbursement this Period

40000.00

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

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

376984.24

570329.45

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>1199 SEIU UHE</b>	Nature of Debt (Purpose): Direct Mail Postage
Mailing Address 310 West 43rd Street	
City State Zip Code New York NY 10036	

Outstanding Balance Beginning This Period 4688.18	<b>Transaction ID : D318325</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4688.18

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Adelstein Liston</b>	Nature of Debt (Purpose): TV Advertising Production
Mailing Address 222 W. Ontario St. Suite 600	
City State Zip Code Chicago IL 60654	

Outstanding Balance Beginning This Period 6750.00	<b>Transaction ID : D299807</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6750.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Berlin Rosen</b>	Nature of Debt (Purpose): Radio Advertising Production
Mailing Address 15 Maiden Lane #1600	
City State Zip Code New York NY 10038	

Outstanding Balance Beginning This Period 2800.00	<b>Transaction ID : D309812</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2800.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	14238.18
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Chambers Lopez Strategies</b>	Nature of Debt (Purpose): Online Advertising Buy, TV & Radio Ad Production
Mailing Address PO Box 5539	
City State Zip Code Arlington VA 22205	

Outstanding Balance Beginning This Period 36350.00	<b>Transaction ID : D287106</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 36350.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Elevation, Ltd.</b>	Nature of Debt (Purpose): Online Advertising Buy
Mailing Address 1027 33rd Street, NW Suite 260	
City State Zip Code Washington DC 20007	

Outstanding Balance Beginning This Period 100040.00	<b>Transaction ID : D289787</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100040.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Google</b>	Nature of Debt (Purpose): Online Advertising Buy
Mailing Address 1600 Ampitheatre Parkway	
City State Zip Code Mountain View CA 94043	

Outstanding Balance Beginning This Period 434.38	<b>Transaction ID : D287115</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 434.38

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	136824.38
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 22 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Image Pointe</b>	Nature of Debt (Purpose): T-Shirts
Mailing Address P O Box 657	
City State Zip Code Waterloo IA 50704	

Outstanding Balance Beginning This Period 41949.50	<b>Transaction ID : D304068</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 41949.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mack/Crouse Group LLC</b>	Nature of Debt (Purpose): Voter Canvass Literature
Mailing Address 4900 Seminary Road Suite 1020	
City State Zip Code Alexandria VA 22311	

Outstanding Balance Beginning This Period 4533.86	<b>Transaction ID : D299810</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4533.86

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mass Uniting</b>	Nature of Debt (Purpose): Canvassing Services from 3/26-4/30 & 5/13-6/25
Mailing Address 150 Mt. Vernon St., 2nd Floor	
City State Zip Code Boston MA 02125	

Outstanding Balance Beginning This Period 33100.00	<b>Transaction ID : D312556</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 33100.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	79583.36
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 23 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mele Printing</b>	Nature of Debt (Purpose): Estimated Cost for Canvass Literature Printing
Mailing Address 619 N. Tyler Street	
City State Zip Code Covington LA 70433	

Outstanding Balance Beginning This Period 3800.00	<b>Transaction ID : D352706</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3800.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mission Control Inc</b>	Nature of Debt (Purpose): Voter Canvass Literature
Mailing Address 114A Mansfield Hollow Road	
City State Zip Code Mansfield Center CT 06250	

Outstanding Balance Beginning This Period 1776.40	<b>Transaction ID : D297651</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1776.40

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Murphy Vogel Askew Reilly LLC</b>	Nature of Debt (Purpose): TV & Radio Advertising Production
Mailing Address 901 North Washington Street Suite 400	
City State Zip Code Alexandria VA 22314-1535	

Outstanding Balance Beginning This Period 1593.75	<b>Transaction ID : D299791</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1593.75

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	7170.15
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 24 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>NGP VAN, Inc.</b>	Nature of Debt (Purpose): Voter Outreach Telephone Calls
Mailing Address 48 Grove Street, Suite 202	
City State Zip Code Somerville MA 02144	

Outstanding Balance Beginning This Period <input type="text" value="1500.00"/>	<b>Transaction ID : D304071</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Pitney Bowes</b>	Nature of Debt (Purpose): Direct Mail Postage
Mailing Address 1 Elmcroft Road	
City State Zip Code Stamford CT 06926	

Outstanding Balance Beginning This Period <input type="text" value="205.69"/>	<b>Transaction ID : D348408</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="205.69"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SEIU General Fund</b>	Nature of Debt (Purpose): Est. Payment for Salary & Benefits/Canvassing Services/Posters
Mailing Address 1800 Massachusetts Ave NW	
City State Zip Code Washington DC 20036	

Outstanding Balance Beginning This Period <input type="text" value="14849.75"/>	<b>Transaction ID : D274285</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="14849.75"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="16555.44"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 25 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SEIU Local 105</b>	Nature of Debt (Purpose): Estimate for Rally Expenses
Mailing Address 2525 W Alameda Ave 2nd Fl	
City State Zip Code Denver CO 80219	

Outstanding Balance Beginning This Period <input type="text" value="5423.18"/>	<b>Transaction ID : D344307</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5423.18"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SEIU Local 1989 - Maine State Emp Assoc</b>	Nature of Debt (Purpose): Voter Outreach Calls
Mailing Address 65 State Street P O Box 1072	
City State Zip Code Augusta ME 04332	

Outstanding Balance Beginning This Period <input type="text" value="5000.00"/>	<b>Transaction ID : D313877</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SEIU Local 521</b>	Nature of Debt (Purpose): Estimate for Rally Expenses
Mailing Address 4100 Empire Drive Suite 150	
City State Zip Code Bakersfield CA 93309	

Outstanding Balance Beginning This Period <input type="text" value="370.00"/>	<b>Transaction ID : D344308</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="370.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="10793.18"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 26 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SEIU MA State Council</b>	Nature of Debt (Purpose): Direct Mail Printing
Mailing Address 145 Tremont Street Suite 202	
City State Zip Code Boston MA 02111	

Outstanding Balance Beginning This Period <input type="text" value="2975.33"/>	<b>Transaction ID : D318326</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2975.33"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Spotset Radio Network</b>	Nature of Debt (Purpose): Radio Advertising Production
Mailing Address 44 N. Second Street Suite 800	
City State Zip Code Memphis TN 38103	

Outstanding Balance Beginning This Period <input type="text" value="2100.00"/>	<b>Transaction ID : D304146</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2100.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Standard Modern Company</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address 47 Pleasant Street	
City State Zip Code Brockton MA 02301	

Outstanding Balance Beginning This Period <input type="text" value="114.35"/>	<b>Transaction ID : D348409</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="114.35"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="5189.68"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 27 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Waterfront Strategies</b>	Nature of Debt (Purpose): TV & Radio Advertising Production/Buys
Mailing Address 1010 Wisconsin Avenue, NW Suite 800	
City State Zip Code Washington DC 20007	

Outstanding Balance Beginning This Period 15037.22	<b>Transaction ID : D297653</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15037.22

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wisconsin Jobs Now</b>	Nature of Debt (Purpose): Radio Advertising Buy
Mailing Address PO BOX 511506	
City State Zip Code Milwaukee WI 53203	

Outstanding Balance Beginning This Period 9075.00	<b>Transaction ID : D304072</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9075.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	24112.22
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	294466.59
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	294466.59