



Amalgamated Transit Union

5025 Wisconsin Ave., N.W., Washington, D.C. 20016-4139
202-537-1645 Fax 202-244-7824

Office of the International Secretary-Treasurer

April 16, 1997

Public Records Office
Federal Election Commission
999 E Street, NW
Washington, DC 20463

Dear Sir or Madam:

Enclosed please find a copy of the April 1997 Report covering the period of March 1, 1997 through March 31, 1997 for Amalgamated Transit Union-COPE.

Trusting this meets with your satisfaction, I am

Sincerely,

Oliver W. Green
International Secretary-Treasurer/
COPE Director

/fsg
Enclosure

APR 16 4 05 PM '97

FEDERAL ELECTION COMMISSION
PUBLIC RECORDS



REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

05/16/97 4 05 PM '97

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Amalgamated Transit Union - COPE

ADDRESS (number and street) Check if different than previously reported
5025 Wisconsin Avenue, NW

CITY, STATE and ZIP CODE
Washington, DC 20016

2. FEC IDENTIFICATION NUMBER
C00032995

3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

- Monthly Report Due On:
- | | | |
|--|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input checked="" type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	3/1/97 through 3/31/97		
6. (a) Cash on Hand January 1, 19 97			\$ 54,702.85
(b) Cash on Hand at Beginning of Reporting Period		\$ 106,920.96	
(c) Total Receipts (from Line 10)		\$ 39,545.67	\$ 109,755.78
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 146,466.63	\$ 164,458.63
7. Total Disbursements (from Line 30)		\$ 46,025.00	\$ 64,017.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 100,441.63	\$ 100,441.63
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ NONE	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-218-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ NONE	

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

Type or Print Name of Treasurer
Oliver W. Green

Signature of Treasurer

Oliver W. Green

Date 4/16/97

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

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FEC FORM 3X
(revised 9/95)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE Amalgamated Transit Union - COPE		REPORT COVERING PERIOD FROM 3/1/97 TO: 3/31/97	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)			250.00
ii. Unitemized		37,771.88	107,288.73
iii. Total (add i and ii) >		37,771.88	107,538.73
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a iii, b and c) >		37,771.88	107,538.73
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		1,500.00	1,500.00
17. Other Federal Receipts (Dividends, Interest, etc.)		273.79	717.05
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		39,545.67	109,755.78
20. Total Federal Receipts (subtract line 18 from line 19) >		39,545.67	109,755.78
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			240.00
b. Other Federal Operating Expenditures			240.00
c. Total Operating Expenditures (add a ii, a ii, and b) >			240.00
22. Transfers to Affiliated/Other Party Committees		20,000.00	20,000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees		24,425.00	41,675.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			2.00
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >			2.00
29. Other Disbursements		1,600.00	2,100.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		46,025.00	64,017.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		46,025.00	64,017.00
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		37,771.88	107,538.73
33. Total Contribution Refunds (from line 28d)			2.00
34. Net Contributions (other than loans)(subtract line 33 from 32)		37,771.88	107,540.73
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			240.00
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from 35) >			240.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 11 (a) (i)

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

NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code Earle W. Putnam 9116 Coronado Terrace Fairfax, VA 22031 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer Amalgamated Transit Union Occupation General Counsel-Retired Aggregate Year-to-Date > \$ 250.00	Date (month, day, year)	Amount of Each Receipt this Period -0-
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

-0-

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 16

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NAME OF COMMITTEE (In Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
The Moynihan Committee 450 7th Avenue, Suite 2207 New York, NY 10123	N/A	3/10/97	1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Contribution Refund	Occupation: N/A	Aggregate Year-to-Date > \$ 1,500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **22**

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NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NationsBank ATU Special Holding Account 1501 Pennsylvania Avenue, NW Washington, DC 20016	Transfer to Non-Federal Account Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	3/31/97	20,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

20,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 5
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Analgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Patrick Kennedy P.O. Box 1356 Providence, RI 02901	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/10/97	125.00
Pascrell for Congress c/o Anne Rutton, Treasurer 63 Quartz Lane Paterson, NJ 07501	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/10/97	300.00
Pallone for Congress P.O. Box 3176 Long Branch, NJ 07740	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/17/97	500.00
Pascrell for Congress 63 Quartz Lane Paterson, NJ 07501	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/19/97	300.00
Congressman Steve Rothman 140 Main Street Hackensack, NJ 07602	96 Debt Retirement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/20/97	1,000.00
Hartke for Congress P.O. Box 626 Effingham, IL 62401	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/24/97	200.00
Carol Mosley-Braun For US Senate 54 W. Hubbard Street, Suite 400 Chicago, IL 60653	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/24/97	500.00
Eva Clayton for Congress P.O. Box 479 Warrenton, NC 27589	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/97	500.00
The Tom Sawyer Committee 1540 W. Market Street, Suite 200 Akron, OH 44313	96 Debt Retirement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/97	2,500.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 5
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Dick Durbin P.O. Box 75214 Washington, DC 20013-5214 IL	96 Debt Retirement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/97	2,500.00
Elect Kucinich to Congress 4921 Dierker Road Columbus, OH 43220 OH	96 Debt Retirement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/97	500.00
Alaskans for Don Young P.O. Box 100298 Anchorage, AK 99510 AK	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,000.00
Jerry Waller for Congress 4451 Brookfield Corp. Drive, #200 Chantilly, VA 20151-1652 IL	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,000.00
Friends of Gerald Solomon P.O. Box 459 Saratoga Springs, NY 12866 NY	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,000.00
Friends of Jack Metcalf P.O. Box 70513 Washington, DC 20024 WA	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,000.00
Frank LoBiondo for Congress P.O. Box 550 Vineland, NJ 08360 NJ	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,000.00
Peter King for Congress Committee 4431 Westover Place, NW Washington, DC 20016 NJ	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,000.00
Sue Kelly for Congress P.O. Box 599 Katonah, NY 10536 NY	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	500.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 5
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Franks for Congress Committee P.O. Box 601 New Providence, NJ 07974 NJ	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,000.00
People for English 208 G Street, NE Washington, DC 20002 PA	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,000.00
Diaz-Balart for Congress Committee 4451 Brookfield Corp. Drive, #200 Chantilly, VA 20151-1652 FL	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	500.00
Friends of Eric Serna for Congress 1996 Warner Drive Santa Fe, NM 87505 NM	Special Election Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	500.00
Bonior for Congress P.O. Box 75214 Washington, DC 20013-5214 MI	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,000.00
Karen McCarthy for Congress P.O. Box 2884 Washington, DC 20013 MO	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	500.00
Citizens for Obey P.O. Box 75214 Washington, DC 20013-5214 WI	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,500.00
Pascrell for Congress 63 Quartz Lane Paterson, NJ 07501 NJ	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,000.00
Bob Filner for Congress P.O. Box 127868 San Diego, CA 92112 CA	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,000.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 5
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Quinn for Congress 1212 North Vernon Street Arlington, VA 22201 NY	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,000.00
B. Full Name, Mailing Address and ZIP Code Bob Ney for Congress P.O. Box 490 St. Clairsville, OH 43950 OH	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,000.00
C. Full Name, Mailing Address and ZIP Code Cummings for Congress P.O. Box 1631 Baltimore, MD 21203 MD	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,000.00
D. Full Name, Mailing Address and ZIP Code Nadler for Congress 379 West Broadway New York, NY 10012 NY	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,500.00
E. Full Name, Mailing Address and ZIP Code Keep Nick Rahall in Congress Committee 1301 Delaware Avenue, #N409 Washington, DC 20024 WV	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	1,500.00
F. Full Name, Mailing Address and ZIP Code Ciro D. Rodriguez for US Congress Comm. 363 West Harding San Antonio, TX 78221 TX	Special Election Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	500.00
G. Full Name, Mailing Address and ZIP Code Capps for Congress 38 Ivy Street, SE Washington, DC 20003 CA	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	500.00
H. Full Name, Mailing Address and ZIP Code The Sanchez Recount Fund 38 Ivy Street, SE Washington, DC 20003 CA	Recount Fund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	3/27/97	1,000.00
I. Full Name, Mailing Address and ZIP Code Dan Williams for Congress P.O. Box 2837 Boise, ID 83701-2837 ID	Void Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	(7/3/96) 3/14/97	-500.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 5
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Dick Durbin P.O. Box 75214 Washington, DC 20013-5214 IL	Void Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	(7/9/96) 3/14/97	-2,500.00
Eva Clayton for Congress P.O. Box 2474 Washington, DC 20013 NC	Void Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	(8/5/96) 3/14/97	-500.00
The Tom Sawyer Committee 421 New Jersey Avenue, NE Washington, DC 20003 OH	Void Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	(9/30/96) 3/14/97	-2,500.00
Bedford for Senate 2361 Fairlane, Drive, Suite M320 Montgomery, AL 36116 AL	Void Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	(10/22/96) 3/14/97	-500.00
Elect Kucinich to Congress 10674 Lorain Avenue Cleveland, OH 44111 OH	Void Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	(11/21/96) 3/14/97	-500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

24,425.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ned Randolph Campaign Committee 1251 Mac Arthur Drive Alexandria, LA 71301 LA	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/26/97	1,000.00
B. Full Name, Mailing Address and ZIP Code Committee To Re-Elect Charlie McLaughlin 750 Brookline Blvd Pittsburgh, PA 15226 PA	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/97	100.00
C. Full Name, Mailing Address and ZIP Code Committee to elect Robert P Ravenstahl, Jr. 44 Radium Street Pittsburgh, PA 15214 PA	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/97	200.00
D. Full Name, Mailing Address and ZIP Code Committee to Elect Ernest J. D'Achille 15 Duff Road Pittsburgh, PA 15235 PA	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/97	200.00
E. Full Name, Mailing Address and ZIP Code Committee to Elect Bodack 4825 Butler Street, 2nd Floor Pittsburgh, PA 15201 PA	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/97	100.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1,600.00

Federal Election Commission
ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered DATE OF RECEIPT
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Other (Specify): POSTMARKED
and/or DATE OF RECEIPT

204
 PREPARER

4-16-97
 DATE PREPARED