

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines AMALGAMATED TRANSIT UNION-COPE

ADDRESS (number and street) 5025 WISCONSIN AVE. N.W. WASHINGTON DC 20016 Check if different than previously reported. (ACC)

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 10 01 2007 through 10 31 2007

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

Type or Print Name of Treasurer Mr. Oscar Owens

Signature of Treasurer Electronically Filed by Mr. Oscar Owens Date 11 19 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
AMALGAMATED TRANSIT UNION-COPE

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		123156.36
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	213713.63									
(c) Total Receipts (from Line 19) .....	43072.53	494404.80								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	256786.16	617561.16								
7. Total Disbursements (from Line 31) .....	75309.00	436084.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	181477.16	181477.16								
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**

Write or Type Committee Name  
AMALGAMATED TRANSIT UNION-COPE

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5755.74	24113.52
(i) Itemized (use Schedule A) .....	36736.28	465608.68
(ii) Unitemized .....	42492.02	489722.20
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	42492.02	489722.20
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.) .....	580.51	4682.60
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)) .....	43072.53	494404.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	43072.53	494404.80

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	48000.00	350550.00
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.....	27309.00	85534.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	75309.00	436084.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	75309.00	436084.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	42492.02	489722.20
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	42492.02	489722.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 87
	<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)  
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Clifton L. Adams		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 7	
Mailing Address 24560 Tamarack Circle		Transaction ID: SA11A1.15686	
City State Zip Code Southfield MI 48075-1019	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer City of Detroit, DOT	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Joyce J. Adams-Watkins		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7	
Mailing Address 99 Lochmoor Circle		Transaction ID: SA11A1.15709	
City State Zip Code Sacramento CA 95823-4107	Amount of Each Receipt this Period 22.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sacramento Reg. Transit Dist.	Occupation transit employee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Kevin L. Alexander		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7	
Mailing Address 4532 Shannondale Drive		Transaction ID: SA11A1.15845	
City State Zip Code Antioch CA 94531	Amount of Each Receipt this Period 42.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bay Area Rapid Transit Dst	Occupation Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	84.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Craig N. Anderson

Mailing Address 3822 24th Avenue South

City State Zip Code  
Seattle WA 98108-1503

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

Name of Employer  
King County DOT-Metro Transit

Occupation  
Transit Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 7

**Transaction ID:** SA11A1.15714

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Paul J. Bachtel

Mailing Address 8513 Main Street #203

City State Zip Code  
Edmonds WA 98026

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

Name of Employer  
King County Metro Transit

Occupation  
Transit Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
475.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 7

**Transaction ID:** SA11A1.15743

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Paul A. Baenen

Mailing Address 9525 College Way North

City State Zip Code  
Seattle WA 98103

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

Name of Employer  
King County Metro Transit

Occupation  
Transit Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 7

**Transaction ID:** SA11A1.15780

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	80.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Mr. Robert H. Baker</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address 6400 Oakley Terrace		<b>Transaction ID: SA11A1.15675</b>
City State Zip Code Frederick MD 21701	Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Amalgamated Transit Union	Occupation International Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 378.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Robert E. Bangs</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 2411 South 248th Street #D-12		<b>Transaction ID: SA11A1.15715</b>
City State Zip Code Kent WA 98032-4070	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County Metro Transit	Occupation Transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C. Kevin P. Bartlein</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 1729 Whitman Avenue, NE		<b>Transaction ID: SA11A1.15777</b>
City State Zip Code Renton WA 98059	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County DOT METRO Transit	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	117.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
John K. Bayer

Mailing Address 3916 N. Christiana Street

City State Zip Code  
Chicago IL 60618-3317

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

Name of Employer Chicago Transit Authority Occupation Operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.15702

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Robert J. Bean

Mailing Address 2144 West Larkspur Drive

City State Zip Code  
Phoenix AZ 85029

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

Name of Employer ATC Phoenix Transit Occupation Operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: SA11A1.15842

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Clyde L. Beckham, Jr.

Mailing Address 5951 14th Street

City State Zip Code  
Sacramento CA 95822-2907

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

Name of Employer Sacramento Reg. Transit Dist. Occupation transit employee

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.15705

Amount of Each Receipt this Period  
21.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	71.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Sheldon I. Belmain		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7	
Mailing Address 67 Robert Circle		Transaction ID: SA11A1.15785	
City State Zip Code Cranston RI 02905-1021		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Rhode Island Public Trans. Auth.		Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Arnold R. Bert		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7	
Mailing Address 841 Halifax Drive		Transaction ID: SA11A1.15786	
City State Zip Code Warwick RI 02886		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Rhode Island Public Trans Aut		Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Thomas P. Betzler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7	
Mailing Address 119 S. St. Cloud Street		Transaction ID: SA11A1.15819	
City State Zip Code Allentown PA 18104		Amount of Each Receipt this Period 67.50	
FEC ID number of contributing federal political committee. C			
Name of Employer Lehigh & Northampton Transit		Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	107.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Mr. Esker C. Bilger, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7	
Mailing Address 3709 Birdeye Lane		<b>Transaction ID: SA11A1.15812</b>	
City State Zip Code Bowie MD 20715		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Washington Metro Area Transit		Occupation Transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) <b>B. William A. Blair</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7	
Mailing Address 369 West Shore Road		<b>Transaction ID: SA11A1.15787</b>	
City State Zip Code Warwick RI 02889-1139		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer RI Public Transit Authority		Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) <b>C. Ms Freda Braylock</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 7	
Mailing Address 56120 Quince Road		<b>Transaction ID: SA11A1.15820</b>	
City State Zip Code South Bend IN 46619-4400		Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer South Bend Pub. Tran. Auth.		Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	80.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Antonette C. Bryant</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 2200 Sycamore Drive #G135		<b>Transaction ID: SA11A1.15844</b>
City Antioch	State CA	Zip Code 94509
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 42.00
Name of Employer Bay Area Rapid Transit District	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Daniel J. Buckley</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 7
Mailing Address 1 Howard Street		<b>Transaction ID: SA11A1.15789</b>
City Smithfield	State RI	Zip Code 02917-3639
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Rhode Island Public Transit Authority	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

Full Name (Last, First, Middle Initial) <b>C. Garcell Bullock</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 7
Mailing Address 9132-8th Avenue		<b>Transaction ID: SA11A1.15830</b>
City Inglewood	State CA	Zip Code 90305
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 37.50
Name of Employer LA City Metro Trans. Auth.	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	104.50
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Mr. Kevin J. Cahill</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7	
Mailing Address 31 Philmont Avenue		<b>Transaction ID: SA11A1.15798</b>	
City State Zip Code Cranston RI 02910	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rhode Island Pub. Trans. Auth.	Occupation Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

Full Name (Last, First, Middle Initial) <b>B. David Floyd Caldwell</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 7	
Mailing Address 504 Surrey Road		<b>Transaction ID: SA11A1.15828</b>	
City State Zip Code Knoxville TN 37915	Amount of Each Receipt this Period 19.50		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Knoxville Transit Authority	Occupation Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.70		

Full Name (Last, First, Middle Initial) <b>C. Mr. Ray H. Campbell</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 28648 226th Avenue SE		<b>Transaction ID: SA11A1.15716</b>	
City State Zip Code Maple Valley WA 98038	Amount of Each Receipt this Period 28.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer King County Metro Transit	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	62.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Ms Mary E. Cavaliere</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 5705 236th Street, SW		<b>Transaction ID: SA11A1.15783</b>	
City State Zip Code Mount Lake Terrace WA 98043		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer King County DOT-Metro Transit		Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. Warren Chapman</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 7	
Mailing Address c/o LU 689 2701 Whitney Place		<b>Transaction ID: SA11A1.15813</b>	
City State Zip Code Forestville MD 20747		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Washington Metro Area Transit		Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>C. David J. Childress</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7	
Mailing Address P.O. Box 9493		<b>Transaction ID: SA11A1.15851</b>	
City State Zip Code Santa Rosa CA 95405		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Golden Gate Bridge Highway Tra		Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	90.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. William G. Clifford

Mailing Address 161 22nd Avenue

City State Zip Code  
Seattle WA 98122-6035

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

Name of Employer King County Metro Transit Occupation Transit Operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 228.06

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 7

Transaction ID: SA11A1.15734

Amount of Each Receipt this Period  
25.34

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles Cook

Mailing Address P.O. Box 5322

City State Zip Code  
Petaluma CA 94955

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

Name of Employer Amalgamated Transit Union Occupation International Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.15674

Amount of Each Receipt this Period  
42.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Edward J. Craig

Mailing Address 14018 SE 121st Street

City State Zip Code  
Renton WA 98059

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

Name of Employer King County Metro Transit Occupation Transit operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 227.88

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 7

Transaction ID: SA11A1.15735

Amount of Each Receipt this Period  
25.32

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	92.66
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 87
	<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"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John J. Crowley, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7
Mailing Address 113 Van Zandt Avenue		Transaction ID: SA11A1.15796
City State Zip Code Newport RI 02840-1645	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Rhode Island Public Transit Auth.	Occupation Transit Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Kenneth M. D'Ambrosio		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7
Mailing Address 43 Bagley Avenue		Transaction ID: SA11A1.15790
City State Zip Code Cranston RI 02920	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Rhode Island Public Transit Authority	Occupation Transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Prenoyal C. Davis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 19004 Silver Creek Avenue E		Transaction ID: SA11A1.15749
City State Zip Code Puyallup WA 98375	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King county DOT-Metro Transit	Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	70.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Jessie T. Day		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 12867 Hazelton		<b>Transaction ID:</b> SA11A1.15847
City State Zip Code Detroit MI 48223	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer Suburban Mobility Authority	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Mark J. De Bord		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 12510 Valley Avenue East		<b>Transaction ID:</b> SA11A1.15755
City State Zip Code Puyallup WA 98372	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Joseph G. De Fluri		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 26420 197th Place SE		<b>Transaction ID:</b> SA11A1.15745
City State Zip Code Kent WA 98042	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	80.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Thomas A. Deibler		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 7
Mailing Address 5209 Naranja Street		<b>Transaction ID:</b> SA11A1.15839
City San Diego	State CA	Zip Code 92114
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 20.00
Name of Employer San Diego Transit Corp.	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Donald D. Delis		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 8331 Foynes Way		<b>Transaction ID:</b> SA11A1.15706
City Sacramento	State CA	Zip Code 95828-6156
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 21.00
Name of Employer Sacramento Reg. Transit Dist.	Occupation transit employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr Thomas J. Denny		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 7
Mailing Address 60 Hawthorne Place #14		<b>Transaction ID:</b> SA11A1.15791
City No Providence, RI	State RI	Zip Code 02904
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 20.00
Name of Employer Rhode Island Public Transit Authority	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	61.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Edward J. Dolores

Mailing Address 1226 Clayburn Lane

City San Jose State CA Zip Code 95121-2608

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

Name of Employer Santa Clara Valley Trans. Auth. Occupation Transit employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.29

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.15711

Amount of Each Receipt this Period  
 44.57

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert J. Dowd

Mailing Address 1307 E John

City Seattle State WA Zip Code 98102

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

Name of Employer King County Metro Transit Occupation Transit Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 1 1 / 2 0 0 7

Transaction ID: SA11A1.15744

Amount of Each Receipt this Period  
 25.00

**C.** Full Name (Last, First, Middle Initial)  
David A. Earle

Mailing Address 3723 NE 777th Street #1

City Seattle State WA Zip Code 98115-8027

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

Name of Employer King County DOT-Metro Transit Occupation Transit operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 1 1 / 2 0 0 7

Transaction ID: SA11A1.15739

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	94.57
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Ms Annie Edwards</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7	
Mailing Address 2901 Bonds Avenue		<b>Transaction ID: SA11A1.15822</b>	
City State Zip Code South Bend IN 46628	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer South Bend Public Transit Corp	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Roy C. Edwards</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 7	
Mailing Address 112 Cass Street		<b>Transaction ID: SA11A1.15799</b>	
City State Zip Code Providence RI 02905	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rhode Island Public Transit Authority	Occupation Transit Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>C. Jimmie R. Ekdahl</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 13218 Third S		<b>Transaction ID: SA11A1.15717</b>	
City State Zip Code Seattle WA 98168	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer King County DOT-Metro Transit	Occupation operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	105.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Greg M. Enge		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 3640 Fawcett Avenue		<b>Transaction ID:</b> SA11A1.15732
City State Zip Code Tacoma WA 98408-6846	Amount of Each Receipt this Period 24.60	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.40	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. David S. Fairbanks		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 8622 202nd SW		<b>Transaction ID:</b> SA11A1.15730
City State Zip Code Edmonds WA 98026-6644	Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Andrew L. Fields		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7
Mailing Address 8511 Marlowe		<b>Transaction ID:</b> SA11A1.15687
City State Zip Code Detroit MI 48228	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer City of Detroit, DOT	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	86.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. James D. Fitzgerald		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7	
Mailing Address 4608 East 13th Avenue		Transaction ID: SA11A1.15823	
City State Zip Code Spokane Valley WA 99212	Amount of Each Receipt this Period 90.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Spokane Transit Authority	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 436.68		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms Mary B. Fitzgerald		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7	
Mailing Address 4608 E. 13th Avenue		Transaction ID: SA11A1.15827	
City State Zip Code Spokane Valley WA 99212-6360	Amount of Each Receipt this Period 96.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Spokane Transit Authority	Occupation transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 472.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms Karen M. Foulks		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7	
Mailing Address 57121 Guernsey		Transaction ID: SA11A1.15821	
City State Zip Code Osceola IN 46561	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer South Bend Public Transit Corp	Occupation Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	221.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John Franchino		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 7	
Mailing Address 8751 Stanwell Street		Transaction ID: SA11A1.15834	
City State Zip Code San Diego CA 92126-3211	Amount of Each Receipt this Period 26.00		
FEC ID number of contributing federal political committee. C			
Name of Employer ATC Vancorn Inc. of California	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.00		

Full Name (Last, First, Middle Initial) <b>B.</b> James W. Friedlan, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 7	
Mailing Address 1529 Constanca Way		Transaction ID: SA11A1.15835	
City State Zip Code El Cajon CA 92019	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer San Diego Transit Corp.	Occupation Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Clifford O. Gaither		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7	
Mailing Address 1621 Mendoata Way		Transaction ID: SA11A1.15707	
City State Zip Code Carmichael CA 95608-5861	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Sacramento Reg. Transit Dist.	Occupation transit employee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	67.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. James R. Gardner

Mailing Address 2080 Bridge Creek Circle

City State Zip Code  
Tracy CA 96377

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

Name of Employer  
Alameda Contra-Costa Transit D

Occupation  
transit operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 7

Transaction ID: SA11A1.15696

Amount of Each Receipt this Period  
40.00

**B.** Full Name (Last, First, Middle Initial)  
Joseph D. Gaudette

Mailing Address 67 Old Thompson Road

City State Zip Code  
Buxton ME 04093

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

Name of Employer  
Greater Portland Transit Dist.

Occupation  
Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.15817

Amount of Each Receipt this Period  
40.00

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

Mailing Address 5214 157th Place SW

City State Zip Code  
Edmonds WA 98026-4706

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

Name of Employer  
King County Metro Transit

Occupation  
Transit Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 7

Transaction ID: SA11A1.15753

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	105.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 87
	<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"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Romeo O. Gordon, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7
Mailing Address 80 Whipple Avenue		<b>Transaction ID:</b> SA11A1.15797
City State Zip Code Barrington RI 02806	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Rhode Island Public Transit Au	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Joseph H. Gotcher		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 7
Mailing Address 918 La Presa Avenue		<b>Transaction ID:</b> SA11A1.15836
City State Zip Code Spring Valley CA 91977-4341	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer ATC Vancom Inc. of California	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms Brigitte Graupe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 342 North 71st		<b>Transaction ID:</b> SA11A1.15764
City State Zip Code Seattle WA 98103-5224	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County DOT - Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	80.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Mic C. Greubel</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 26625 469th Avenue, NE		<b>Transaction ID: SA11A1.15760</b>	
City State Zip Code Darrington WA 98241		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer King County DOT-Metro Transit		Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. Ms Esther L. Hankerson</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 23005 NE 150th		<b>Transaction ID: SA11A1.15733</b>	
City State Zip Code Woodinville WA 98072		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer King County DOT-Metro Transit		Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C. Mr Lawrence Hanley</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 40-D Dinsmore Street		<b>Transaction ID: SA11A1.15682</b>	
City State Zip Code Staten Island NY 10314		Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Amalgamated Transit Union		Occupation International Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 378.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	97.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Mr. Donald T. Hansen</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 12016 Bronson Street, SE		<b>Transaction ID: SA11A1.15673</b>	
City State Zip Code Tenino WA 98589		Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Amalgamated Transit Union International Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 378.00	

Full Name (Last, First, Middle Initial) <b>B. Ms Karen Head</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 1327 V Street, NW		<b>Transaction ID: SA11A1.15679</b>	
City State Zip Code Washington DC 20009		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Amalgamated Transit Union Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C. Audrey R. Hedstrom</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 22413 111th Avenue, SE		<b>Transaction ID: SA11A1.15775</b>	
City State Zip Code Kent WA 98031		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation King County DOT-METRO Transit Operator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	92.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Ronald J. Heintzman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 12126 Meridian Road, NE		Transaction ID: SA11A1.15681	
City State Zip Code Mt. Angel OR 97362		Amount of Each Receipt this Period 45.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Amalgamated Transit Union International Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>B.</b> James L. Hermanson, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 901 Taylor Avenue N. #306		Transaction ID: SA11A1.15729	
City State Zip Code Seattle WA 98109		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation King Co. DOT - DOT Metro Trans transit operator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Lewis C. Hohman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7	
Mailing Address 857 Garnet Street		Transaction ID: SA11A1.15708	
City State Zip Code W. Sacramento CA 95691-2159		Amount of Each Receipt this Period 21.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Sacramento Reg. Transit Dist. transit employee			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	91.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 87
	<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"/>	<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Raymond A. Holt, Jr.

Mailing Address 574 Central Avenue

City Johnston State RI Zip Code 02919-4711

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

Name of Employer Rhode Island Public Transit Authority  
Occupation Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 7

Transaction ID: SA11A1.15792

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Sandra G. Huff

Mailing Address P.O. Box 952

City Seattle State WA Zip Code 98111

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

Name of Employer King County DOT-Metro Transit  
Occupation operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 7

Transaction ID: SA11A1.15748

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Ms Regina D. Jackson

Mailing Address P.O. Box 1138

City Maple Valley State WA Zip Code 98038

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

Name of Employer King County DOT-Metro Transit  
Occupation Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 7

Transaction ID: SA11A1.15781

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Robert L. Jackson, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 10042 Ravenna Avenue NE		Transaction ID: SA11A1.15728
City State Zip Code Seattle WA 98125-7742	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King county DOT	Occupation transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Jerry L. Jacobs		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 2112 North 41st		Transaction ID: SA11A1.15741
City State Zip Code Seattle WA 98103	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Darrell Jefferson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 545 E. 50th Street		Transaction ID: SA11A1.15701
City State Zip Code Chicago IL 60615	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Chicago Transit Authority	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	140.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard W. Johnson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 7
Mailing Address 15833 West Carrabean Lane		<b>Transaction ID:</b> SA11A1.15840
City State Zip Code Surprise AZ 85379	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer ATC Phoenix Transit Nec.	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Anthony L. Jones		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 22061 Scott Drive		<b>Transaction ID:</b> SA11A1.15704
City State Zip Code Richton Park IL 60471	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Chicago Transit Authority	Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms Rebecca Jones-White		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address 5738 Holway Court		<b>Transaction ID:</b> SA11A1.15699
City State Zip Code Oakland CA 94621	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Alameda Contra Costa Tran- s.	Occupation Transit employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Paul Kaplan		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 0 7
Mailing Address P.O. Box 2561		Transaction ID: SA11A1.15852
City State Zip Code Boca Raton FL 33427	Amount of Each Receipt this Period 120.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Palm Tran, Inc.	Occupation transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 830.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms Sharon Kelly-Vrontos		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 115 Larchwood Drive		Transaction ID: SA11A1.15694
City State Zip Code Turtle Creek PA 15145	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Port Authority Transit	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Maurice K. Kimble		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Mailing Address 3540 Eden Avenue		Transaction ID: SA11A1.15805
City State Zip Code Cincinnati OH 45229	Amount of Each Receipt this Period 20.84	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer SW Ohio Regional Transit Auth.	Occupation Transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.24	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	165.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Kenneth R. Kirk		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address 1236 Spring Water Drive		<b>Transaction ID:</b> SA11A1.15683
City State Zip Code Lancaster TX 75134	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Amalgamated Transit Union	Occupation International Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Jerry L. Kleiboeker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 7
Mailing Address 5015 Comanche #L		<b>Transaction ID:</b> SA11A1.15837
City State Zip Code La Mesa CA 91941	Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. C		
Name of Employer ATC Vancon Inc. of California	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 352.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Ralph T. Klugh		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 3418 Cedar Glen Drive		<b>Transaction ID:</b> SA11A1.15693
City State Zip Code Allison Park PA 15101	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Port Athority of Allegheny	Occupation transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	127.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Ronald Lee Layton		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 7
Mailing Address 405 N. Marengo Avenue #10		Transaction ID: SA11A1.15832
City Pasadena State CA Zip Code 91101	Amount of Each Receipt this Period 37.50	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer LA City Metro Transit Auth Occupation Operator	Aggregate Year-to-Date ▼ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Harold R. Lemmon		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 3224 South 136th		Transaction ID: SA11A1.15769
City Tukwila State WA Zip Code 98168	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County DOT Occupation operator	Aggregate Year-to-Date ▼ 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Richard T. Lovata		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 4020 SW 321st Street		Transaction ID: SA11A1.15770
City Federal Way State WA Zip Code 98023-2461	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County DOT - Metro Transit Occupation Transit Operator	Aggregate Year-to-Date ▼ 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	87.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Ms Benetta Mansfield</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 4025 North Randolph Street		<b>Transaction ID: SA11A1.15684</b>	
City State Zip Code Arlington VA 22207	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Amalgamated Transit Union	Occupation Chief of Staff		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Charles C. Mathewson</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7	
Mailing Address 30 Clark Lane		<b>Transaction ID: SA11A1.15793</b>	
City State Zip Code Kingstown RI 02881	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer RI Public Transit Auth.	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Robert J. Mazzei</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7	
Mailing Address 1448 Balsam Drive		<b>Transaction ID: SA11A1.15695</b>	
City State Zip Code Alison Park PA 15101-3948	Amount of Each Receipt this Period 42.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Port Authority of Allegheny	Occupation Transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	92.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Kenneth Mc Cormick		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 11027 Auburn Avenue, South		Transaction ID: SA11A1.15731
City State Zip Code Seattle WA 98178	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County DOT, Metro Transit	Occupation transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. James L. Mc Cubbin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 7
Mailing Address P.O. Box 56516		Transaction ID: SA11A1.15841
City State Zip Code Phoenix AZ 85079-6516	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer ATC Phoenix Transit	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>C.</b> John L. Mc Donald		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Mailing Address 1539 Yarmouth Avenue		Transaction ID: SA11A1.15806
City State Zip Code Cincinnati OH 45237	Amount of Each Receipt this Period 20.88	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer SW Ohio Regional Transit Auth.	Occupation Transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.80	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	85.88
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Marvin R. Mc Donald

Mailing Address 2415 Thorndyke Avenue, W #402

City State Zip Code  
Seattle WA 98199

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

Name of Employer King County DOT- Metro Transit  
Occupation Transit Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
243.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 7

**Transaction ID:** SA11A1.15718

Amount of Each Receipt this Period  
27.00

**B.** Full Name (Last, First, Middle Initial)  
Booker T. McKinion

Mailing Address 3862 Renton Avenue South

City State Zip Code  
Seattle WA 98108

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

Name of Employer King County DOT-Metro Transit  
Occupation operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 7

**Transaction ID:** SA11A1.15740

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William G. Mc Lean

Mailing Address 2350 Greensboro Drive

City State Zip Code  
Reno NV 89509

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

Name of Employer Amalgamated Transit Union  
Occupation International Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.06

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 2 / 2 0 0 7

**Transaction ID:** SA11A1.15680

Amount of Each Receipt this Period  
83.34

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	160.34
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Matthew Mervosh</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 2919 Brevard Avenue		<b>Transaction ID: SA11A1.15691</b>
City State Zip Code Pittsburgh PA 15227	Amount of Each Receipt this Period 41.67	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation PAT Transportation Operator	Aggregate Year-to-Date ▼ 229.22	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Raymond B. Messier</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address 2696 Barndance Lane		<b>Transaction ID: SA11A1.15850</b>
City State Zip Code Santa Rosa CA 95407	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Golden Gate Bridge Highway Tra operator	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. Charles N. Miller</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 738 34th Avenue		<b>Transaction ID: SA11A1.15751</b>
City State Zip Code Seattle WA 98122-5132	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation King County Metro Transit Transit Operator	Aggregate Year-to-Date ▼ 270.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	101.67
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Ms Virginia A. Moffitt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7	
Mailing Address 221 Indiana Avenue		<b>Transaction ID:</b> SA11A1.15803	
City State Zip Code Providence RI 02905	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rhode Island Public Transit Au	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Michael R. Monti		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7	
Mailing Address P.O. Box 19651		<b>Transaction ID:</b> SA11A1.15802	
City State Zip Code Johnston RI 02919	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rhode Island Public Transit Au	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Michael J. Moore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 5719 Olive Avenue SE		<b>Transaction ID:</b> SA11A1.15752	
City State Zip Code Auburn WA 98092	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer King County Metro Transit	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	65.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 / 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert E. Moore		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 14511 SE 252nd Place		<b>Transaction ID:</b> SA11A1.15758
City State Zip Code Kent WA 98042	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Wes R. Moorehead		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address P.O. Box 3011		<b>Transaction ID:</b> SA11A1.15747
City State Zip Code Kent WA 98032-0201	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Tommy N. Mullins		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address 5240 Dresden Lane		<b>Transaction ID:</b> SA11A1.15671
City State Zip Code Roanoke VA 24012	Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Amalgamated Transit Union	Occupation International Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 378.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	122.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John C. Munro		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 5726 145th Place, SW		<b>Transaction ID:</b> SA11A1.15719
City State Zip Code Edmonds WA 98026-3729	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Richard M. Murphy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address 346 Washington Street #143		<b>Transaction ID:</b> SA11A1.15678
City State Zip Code Braintree MA 02184	Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Amalgamated Transit Union	Occupation International Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 378.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Paul B. Neil		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 1701 157th Avenue NE #A101		<b>Transaction ID:</b> SA11A1.15736
City State Zip Code Bellevue WA 98008-2777	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County Metro Transit	Occupation Transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	117.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Lance F. Norton		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 3529 158th SW		Transaction ID: SA11A1.15720
City State Zip Code Lynwood WA 98037-1415	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Kellee K. Oglesby		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 9307 Country Hollow Drive E		Transaction ID: SA11A1.15782
City State Zip Code Puyallup WA 98375-9669	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County DOT-Metro Transit	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. J. Fred Olander		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 5308 134th Street, SE		Transaction ID: SA11A1.15722
City State Zip Code Everett WA 98208	Amount of Each Receipt this Period 26.00	
FEC ID number of contributing federal political committee. C		
Name of Employer King County Metro Transit	Occupation Transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	76.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Wilfred M. Owens

Mailing Address 336 Ohio Street

City State Zip Code  
Vallejo CA 94590-5053

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

Name of Employer Golden Gate Bridge Hwy. Tr. Dist. Occupation Transit Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 19 / 2007

Transaction ID: SA11A1.15849

Amount of Each Receipt this Period  
21.00

**B.** Full Name (Last, First, Middle Initial)  
Steven K. Parrish

Mailing Address 918 East Nora

City State Zip Code  
Spokane WA 99207-2458

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

Name of Employer Spokane Transit Authority Occupation Transit Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.40

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 29 / 2007

Transaction ID: SA11A1.15824

Amount of Each Receipt this Period  
41.68

**C.** Full Name (Last, First, Middle Initial)  
Mr Raymond K. Pekarovic

Mailing Address P.O. Box 1501

City State Zip Code  
Bothell WA 98401

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

Name of Employer King County DOT - Metro Transit Occupation operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 11 / 2007

Transaction ID: SA11A1.15771

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	112.68
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Javier M. Perez, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address 923 West 33rd Street		Transaction ID: SA11A1.15677
City State Zip Code Kansas City MO 64111	Amount of Each Receipt this Period 21.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Amalgamated Transit Union	Occupation International Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.50	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms Brenda Pernell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Mailing Address 20 Calhoun Street		Transaction ID: SA11A1.15697
City State Zip Code Vallejo CA 94590	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Alameda-Contra Costa Trans Di	Occupation transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Shawn Perry		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address 5601 42nd Avenue		Transaction ID: SA11A1.15676
City State Zip Code Hyattsville MD 20781	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Amalgamated Transit Union	Occupation Editor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	76.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Larry Pradier

Mailing Address 5733 Bonfair Avenue

City State Zip Code  
Lakewood CA 90712

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

Name of Employer  
Transportation Concepts Hemet

Occupation  
Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 7

**Transaction ID:** SA11A1.15831

Amount of Each Receipt this Period  
37.50

**B.** Full Name (Last, First, Middle Initial)  
Mr. James E. Reese

Mailing Address 7956 Delridge Way SW

City State Zip Code  
Seattle WA 98108

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

Name of Employer  
King County Metro Transit

Occupation  
Transit worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 0 7

**Transaction ID:** SA11A1.15762

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James R. Reid

Mailing Address 13 Oak Street

City State Zip Code  
Oxbridge MA 01569

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

Name of Employer  
Rhode Island Public Transit Au

Occupation  
Transit Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 7

**Transaction ID:** SA11A1.15804

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	87.50
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Rodney Richmond Mailing Address 4303 Pine Lane City State Zip Code Spring TX 77389-4642 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.15672 Amount of Each Receipt this Period 42.00
Name of Employer: Amalgamated Transit Union Occupation: International Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 378.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Maurice W. Ring Mailing Address P.O. Box 12525 City State Zip Code San Diego CA 92112 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.15838 Amount of Each Receipt this Period 24.00
Name of Employer: ATC Vancom Inc of CA LP Occupation: Transit operator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 232.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Rudy Robinson Mailing Address 1706 South 48th Street City State Zip Code Tacoma WA 98408 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.15750 Amount of Each Receipt this Period 25.00
Name of Employer: King County Metro Transit Occupation: Transit Operator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>91.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 87
	<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"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Daniel G. Rodriguez, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 209 Ray Avenue		Transaction ID: SA11A1.15814
City State Zip Code San Antonio TX 78204	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer VIA Metro Transit Authority	Occupation transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Glenn Rosales		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7
Mailing Address 10714 Homeland Avenue		Transaction ID: SA11A1.15829
City State Zip Code Whittier CA 90603	Amount of Each Receipt this Period 31.50	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Los Angeles City Transit	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Richard J. Rose, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7
Mailing Address 388 Fair Street		Transaction ID: SA11A1.15794
City State Zip Code Warwick RI 02888-3720	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Rhode Island Public Transit Auth.	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	131.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Raymond M. Ryan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7
Mailing Address 29 Dickinson Avenue		<b>Transaction ID:</b> SA11A1.15795
City State Zip Code North Providence RI 02904	Amount of Each Receipt this Period 18.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Rhode Island Public Transit Authority	Occupation transit worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Neal I. Safrin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 5451 NE 203rd Place		<b>Transaction ID:</b> SA11A1.15746
City State Zip Code Lake Forest Park WA 98155	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County Metro Transit	Occupation Transit Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms Yvette Salazar		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address 2713 East 132nd Place		<b>Transaction ID:</b> SA11A1.15685
City State Zip Code Thornton CO 80241	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Amalgamated Transit Union	Occupation International Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	98.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert L. Scott		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address 12731 Riding Trail Drive		<b>Transaction ID:</b> SA11A1.15698
City State Zip Code Wilton CA 94693	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Alameda-Contra Costa Transit D	Occupation Transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John W. Sepolen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 2401 SW Holden Street #Q107		<b>Transaction ID:</b> SA11A1.15737
City State Zip Code Seattle WA 98034	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.74	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Jerold Shaff		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address 196 Country Manor West		<b>Transaction ID:</b> SA11A1.15713
City State Zip Code Webster NY 14580-3383	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Liftline, Inc.	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	95.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Matthew J. Shaw, Sr.</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address 553 Gansz Road		<b>Transaction ID: SA11A1.15712</b>
City State Zip Code Lyons NY 14489	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Lifeline, Inc.	Occupation Transit operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Brian L. Sherlock</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 1557 NE 171st Street		<b>Transaction ID: SA11A1.15723</b>
City State Zip Code Shoreline WA 98155-6022	Amount of Each Receipt this Period 22.98	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.98	

Full Name (Last, First, Middle Initial) <b>C. Ms Yvonne M. Short</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 11469 69th Place South		<b>Transaction ID: SA11A1.15763</b>
City State Zip Code Seattle WA 98178-3002	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	67.98
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Ms Loretta Springer

Mailing Address 1600 Decker Avenue

City State Zip Code  
San Martin CA 95046

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

Name of Employer Occupation  
Santa Clara Valley Transit Transit Operator  
Auth.

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
291.83

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 18 / 2007

Transaction ID: SA11A1.15710

Amount of Each Receipt this Period  
49.03

**B.** Full Name (Last, First, Middle Initial)  
Tonia Starkey-Oba

Mailing Address 11560 Oldegate Drive

City State Zip Code  
Cincinnati OH 45246

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

Name of Employer Occupation  
SW Ohio Regional Tranist Transit Operator  
Auth.

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 10 / 2007

Transaction ID: SA11A1.15809

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Willie Stephens Jr.

Mailing Address 3260 Rocker Drive #6

City State Zip Code  
Cincinnati OH 45239

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

Name of Employer Occupation  
SW Ohio Regional Transit Operator  
Auth.

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.40

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 10 / 2007

Transaction ID: SA11A1.15810

Amount of Each Receipt this Period  
20.84

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	94.87
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Randy A. Stevenson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 5737 A Prentice Street		<b>Transaction ID:</b> SA11A1.15773
City State Zip Code Seattle WA 98178-2248	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County DOT-METRO Transit	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mickey G. Stewart		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 7
Mailing Address Box 237		<b>Transaction ID:</b> SA11A1.15825
City State Zip Code Athol ID 83801	Amount of Each Receipt this Period 51.68	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Spokane Transit Authority	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.40	

<b>C.</b> Full Name (Last, First, Middle Initial) John Stroud		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 525 28th Avenue South		<b>Transaction ID:</b> SA11A1.15757
City State Zip Code Seattle WA 98144	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County DOT-Metro Transit	Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	151.68
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Owen C. Sweetland</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7
Mailing Address 139 Rounds Avenue		<b>Transaction ID: SA11A1.15800</b>
City State Zip Code East Providence RI 02915	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RI Public Transit Authority	Occupation Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Mark P. Tambellini</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 943 Fairfield Lane		<b>Transaction ID: SA11A1.15690</b>
City State Zip Code McDonald PA 15057	Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer PAT Transit Allegheny Co.	Occupation transit employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00	

Full Name (Last, First, Middle Initial) <b>C. Michael J. Teeter</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 1715 SW Trenton Street		<b>Transaction ID: SA11A1.15779</b>
City State Zip Code Seattle WA 98106	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County DOT-Metro Transit	Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	112.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert G. Tuttle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address P.O. Box 33392		<b>Transaction ID:</b> SA11A1.15756
City State Zip Code Seattle WA 98133-0392	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Jimmy O. Vann		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 2353 Martin Luther King Jr Way		<b>Transaction ID:</b> SA11A1.15768
City State Zip Code Tacoma WA 98405	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County DOT-Metro Transit	Occupation operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. David C. Vestal		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 6205 26th Street, NE		<b>Transaction ID:</b> SA11A1.15754
City State Zip Code Tacoma WA 98422-3310	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer King County Metro Transit	Occupation Transit Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	105.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 / 87						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

Full Name (Last, First, Middle Initial) <b>A.</b> Lucas W. Voorhees		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 2219 NE 8th Place		<b>Transaction ID:</b> SA11A1.15766	
City Renton	State WA	Zip Code 98056-3511	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer King County DOT/Metro Transit	Occupation Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms Deeann K. Wakenight		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 4155 12th Avenue South		<b>Transaction ID:</b> SA11A1.15742	
City Seattle	State WA	Zip Code 98108-1413	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer King County Metro Transit	Occupation Transit Employee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Del L. Walker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7	
Mailing Address P.O. Box 30572		<b>Transaction ID:</b> SA11A1.15818	
City Bellingham	State WA	Zip Code 98228	Amount of Each Receipt this Period 12.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Whatcom Transit Authority	Occupation transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	72.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jerry Wallace, III		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 7706 37th Avenue South		Transaction ID: SA11A1.15724	
City State Zip Code Seattle WA 98118-4008	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer King County Metro Transit	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Raymond Wallace		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 7	
Mailing Address 907 Briarwood Crest		Transaction ID: SA11A1.15815	
City State Zip Code Nashville TN 37221-4353	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Donald L. Ward		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 2538 S. Raymond Street		Transaction ID: SA11A1.15725	
City State Zip Code Seattle WA 98108	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer King Co DOT, Metro-Transit	Occupation Transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	285.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 57 / 87</span>
	(check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Harvey B. Watkins		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7	
Mailing Address 1609 Montier Street		<b>Transaction ID:</b> SA11A1.15689	
City State Zip Code Pittsburgh PA 15221		Amount of Each Receipt this Period 16.67	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Port Authority Transit      Occupation Operator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.03	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Carey P. Watson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 19903 - 112th Avenue NE #G104		<b>Transaction ID:</b> SA11A1.15726	
City State Zip Code Bothell WA 98011		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer King County Metro Transit      Occupation Transit Operator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Craig D. Whitehead		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 7	
Mailing Address 1803 Andina Avenue #14		<b>Transaction ID:</b> SA11A1.15807	
City State Zip Code Cincinnati OH 45237		Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SW Ohio Regional Transit Ath      Occupation Transit Operator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 330.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	61.67
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Chris W. Wick Mailing Address 10525 SE 250th Place #G-103 City State Zip Code Kent WA 98030 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.15767 Amount of Each Receipt this Period 50.00
Name of Employer King County DOT-Metro Transit Occupation operator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms Kelly R. Wickham Mailing Address 6706 North Van De Car Road, SE City State Zip Code Port Orchard WA 98367 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.15759 Amount of Each Receipt this Period 50.00
Name of Employer King County Metro Transit Occupation Transit worker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Jimmy Williams Mailing Address 215 31st Avenue S. City State Zip Code Seattle WA 98144 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.15784 Amount of Each Receipt this Period 50.00
Name of Employer King County DOT Occupation Transit Operator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Ms Yvonne M. Williams</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7	
Mailing Address 2475 60th Avenue		Transaction ID: SA11A1.15700	
City State Zip Code Oakland CA 94605	Amount of Each Receipt this Period 45.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Alameda-Contra Costa Trans Dis	Occupation transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Donald R. Williamson</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 6225 Park Way		Transaction ID: SA11A1.15772	
City State Zip Code Lynnwood WA 98036	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer King County DOT-Metro Transit	Occupation Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C. Ms Ruth Wilson</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 13041 15th NE		Transaction ID: SA11A1.15727	
City State Zip Code Seattle WA 98125	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer King County Metro Transit	Occupation Transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	95.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Anthony R. Withington		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 7	
Mailing Address 5817 Blank Road		Transaction ID: SA11A1.15848	
City State Zip Code Sebastopol CA 95472-6115	Amount of Each Receipt this Period 42.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Golden Gate Bridge Hwy Tr. Dist.	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Stephen Wong		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 7	
Mailing Address 608 North Third Street		Transaction ID: SA11A1.15926	
City State Zip Code San Jose CA 95112-5119	Amount of Each Receipt this Period 46.80		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Santa Clara Vly Transit Auth.	Occupation transit employee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 278.55		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms Eryn Yula		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7	
Mailing Address 2532 Filbert Street		Transaction ID: SA11A1.15846	
City State Zip Code Oakland CA 94607	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bay Area Rapid Transit	Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	118.80
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	5755.74

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 61 / 87	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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

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

Mailing Address 5001 Wisconsin Avenue, N.W.

City	State	Zip Code
Washington	DC	20016

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

Name of Employer	Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4682.60

Date of Receipt  

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

Transaction ID: SA17.15670

Amount of Each Receipt this Period  
580.51

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	580.51
<b>TOTAL</b> This Period (last page this line number only) .....	▶	580.51

# 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)  
AMALGAMATED TRANSIT UNION-COPE

**A.** Full Name (Last, First, Middle Initial)  
CIRO D RODRIGUEZ FOR CONGRESS

Mailing Address PO BOX 14528

City SAN ANTONIO State TX Zip Code 78214

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: TX District: 28

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.15553

Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
CITIZENS FOR TOM PETRI

Mailing Address PO BOX 270

City FOND DU LAC State WI Zip Code 54935

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: WI District: 06

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.15563

Date of Disbursement

10 / 16 / 2007

Amount of Each Disbursement this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
COMMITTEE FOR HISPANIC CAUSES/BUILDING OUR LEADERSHIP  
DIVERSITY PAC (CHC BOLD PAC)

Mailing Address 1831 Bay Street SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼  
Other

Transaction ID: SB23.15586

Date of Disbursement

10 / 26 / 2007

Amount of Each Disbursement this Period

2500.00

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

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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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)  
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) <b>A. CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE</b>		<b>Transaction ID:</b> SB23.15561
Mailing Address PO BOX 1631		Date of Disbursement 10 / 04 / 2007
City BALTIMORE	State MD	Zip Code 21203
Purpose of Disbursement		Amount of Each Disbursement this Period 2500.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD	District: 07	

Full Name (Last, First, Middle Initial) <b>B. DARCY BURNER FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.15560
Mailing Address PO BOX 1090		Date of Disbursement 10 / 04 / 2007
City CARNATION	State WA	Zip Code 98014
Purpose of Disbursement		Amount of Each Disbursement this Period 500.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA	District: 08	

Full Name (Last, First, Middle Initial) <b>C. DOYLE FOR CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> SB23.15564
Mailing Address 2227 HAMPTON STREET		Date of Disbursement 10 / 16 / 2007
City PITTSBURGH	State PA	Zip Code 15218
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District: 18	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. JESSE JACKSON JR FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.15587</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 7
Mailing Address 7016 S. EUCLID		Amount of Each Disbursement this Period 2500.00
City CHICAGO State IL Zip Code 60649	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 02	
Category/Type		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. JOHN KERRY FOR SENATE</b>		<b>Transaction ID: SB23.15555</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address 10 G STREET NE SUITE 710		Amount of Each Disbursement this Period 5000.00
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MA District: 00	
Category/Type		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. JOHN KERRY FOR SENATE</b>		<b>Transaction ID: SB23.15667</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 7
Mailing Address 10 G STREET NE SUITE 710		Amount of Each Disbursement this Period 5000.00
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MA District: 00	
Category/Type		
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> 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)  
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) <b>A. KEEPING AMERICA'S PROMISE INC.</b>		<b>Transaction ID: SB23.15668</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 7
Mailing Address 10 G Street NE Suite 710		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement <input type="text"/>	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Other	

Full Name (Last, First, Middle Initial) <b>B. KENTUCKY STATE DEMOCRATIC CENTRAL EXECUTIVE COMMITTEE</b>		<b>Transaction ID: SB23.15565</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address 190 Democrat Drive		Amount of Each Disbursement this Period 5000.00
City Frankfort State KY Zip Code 40601	Purpose of Disbursement <input type="text"/>	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Other	

Full Name (Last, First, Middle Initial) <b>C. LOFGREN FOR CONGRESS</b>		<b>Transaction ID: SB23.15554</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address 111 W ST JOHN STREET SUITE 400		Amount of Each Disbursement this Period 1000.00
City SAN JOSE State CA Zip Code 95113	Purpose of Disbursement <input type="text"/>	
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 16	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>

# 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)  
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) <b>A. LONE STAR FUND</b>		<b>Transaction ID:</b> SB23.15569 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 7
Mailing Address 607 14TH STREET NW SUITE 800		Amount of Each Disbursement this Period 2500.00
City WASHINGTON State DC Zip Code 20005		
Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ OTHER		
Category/Type		

Full Name (Last, First, Middle Initial) <b>B. LOT OF PEOPLE FOR DAVE OBEY</b>		<b>Transaction ID:</b> SB23.15568 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 7
Mailing Address PO BOX 1322		Amount of Each Disbursement this Period 2500.00
City WAUSAU State WI Zip Code 54402		
Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type		

Full Name (Last, First, Middle Initial) <b>C. PALLONE FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.15567 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address PO BOX 3176		Amount of Each Disbursement this Period 1000.00
City LONG BRANCH State NJ Zip Code 07740		
Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> 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)  
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) <b>A. PERLMUTTER FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.15557
Mailing Address 3440 Youngfield St #264		Date of Disbursement 10 / 01 / 2007
City Wheat Ridge	State CO	Zip Code 80033
Purpose of Disbursement		Amount of Each Disbursement this Period 1500.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO	District: 07	

Full Name (Last, First, Middle Initial) <b>B. SCHIFF FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.15559
Mailing Address 555 CAPITOL MALL SUITE 1425		Date of Disbursement 10 / 01 / 2007
City SACRAMENTO	State CA	Zip Code 95814
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 27	

Full Name (Last, First, Middle Initial) <b>C. SHEILA JACKSON LEE FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.15562
Mailing Address 4412 ALMEDA		Date of Disbursement 10 / 16 / 2007
City HOUSTON	State TX	Zip Code 77044
Purpose of Disbursement		Amount of Each Disbursement this Period 2500.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 18	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5000.00</b>
<b>TOTAL</b> 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)  
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) <b>A. SHERMAN FOR CONGRESS</b>		<b>Transaction ID: SB23.15583</b> Date of Disbursement 10 / 26 / 2007	
Mailing Address 555 SOUTH FLOWER STREET SUITE 4510		Amount of Each Disbursement this Period 1000.00	
City LOS ANGELES	State CA		Zip Code 90071
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 24			

Full Name (Last, First, Middle Initial) <b>B. SOLIS FOR CONGRESS</b>		<b>Transaction ID: SB23.15558</b> Date of Disbursement 10 / 01 / 2007	
Mailing Address 8665 WILSHIRE BLVD #220		Amount of Each Disbursement this Period 2500.00	
City BEVERLY HILLS	State CA		Zip Code 95814
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 31			

Full Name (Last, First, Middle Initial) <b>C. TUESDAY GROUP POLITICAL ACTION COMMITTEE</b>		<b>Transaction ID: SB23.15571</b> Date of Disbursement 10 / 24 / 2007	
Mailing Address PO BOX 40385		Amount of Each Disbursement this Period -1000.00	
City WASHINGTON	State DC		Zip Code 20016
Purpose of Disbursement 8/9/2007 Check lost and never cashed			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District: Other			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2500.00
<b>TOTAL</b> 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)  
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial)

**A. TUESDAY GROUP POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 40385

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼  
Other

Transaction ID: SB23.15588

Date of Disbursement

10 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

48000.00

# 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)

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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)  
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) <b>A. Aaron Broussard Campaign Committee</b>		<b>Transaction ID:</b> SB29.15577 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 3329 Florida Avenue Suite 220		Amount of Each Disbursement this Period 250.00
City Kenner State LA Zip Code 70065	Purpose of Disbursement Non Federal contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Bob Kelly for Whatcom County Council</b>		<b>Transaction ID:</b> SB29.15637 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 7
Mailing Address P.O. Box 2633		Amount of Each Disbursement this Period 150.00
City Bellingham State WA Zip Code 98227	Purpose of Disbursement Non federal contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Brian Garry for ONE Cincinnati</b>		<b>Transaction ID:</b> SB29.15661 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 7
Mailing Address 3465 Cornell Place		Amount of Each Disbursement this Period 500.00
City Cincinnati State OH Zip Code 45220	Purpose of Disbursement Non federal contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A. Bruce Bassett for City Council</b> Full Name (Last, First, Middle Initial) Mailing Address 8551 SE 82nd Street City Mercer Island State WA Zip Code 98040 Purpose of Disbursement Non Federal contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB29.15595</b> Date of Disbursement 10 / 04 / 2007 Amount of Each Disbursement this Period 300.00 Category/Type
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<b>B. Chris Ellen for City Council</b> Full Name (Last, First, Middle Initial) Mailing Address 18336 Aurora N Suite 112-411 City Shoreline State WA Zip Code 98133 Purpose of Disbursement Non federal contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB29.15604</b> Date of Disbursement 10 / 04 / 2007 Amount of Each Disbursement this Period 500.00 Category/Type
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<b>C. Committee to Elect Byron Lee</b> Full Name (Last, First, Middle Initial) Mailing Address 40 Gainswood Drive City Marrero State LA Zip Code 70072 Purpose of Disbursement Non Federal contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB29.15576</b> Date of Disbursement 10 / 03 / 2007 Amount of Each Disbursement this Period 250.00 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> 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

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

Full Name (Last, First, Middle Initial) <b>A. Committee to Elect Marilyn Strickland</b>		<b>Transaction ID:</b> SB29.15589 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 1337		Amount of Each Disbursement this Period 500.00
City Tacoma State WA Zip Code 98401	Purpose of Disbursement Non Federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Committee to Keep Judge John H. Burlew</b>		<b>Transaction ID:</b> SB29.15663 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 7
Mailing Address 830 Main Street Suite 604		Amount of Each Disbursement this Period 500.00
City Cincinnati State OH Zip Code 45202	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Committee to Reelect Richard Marin</b>		<b>Transaction ID:</b> SB29.15615 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 18918 80th West		Amount of Each Disbursement this Period 500.00
City Edmonds State WA Zip Code 98026	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Corker for City Council</b>		<b>Transaction ID:</b> SB29.15651 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address 6820 N. Cedar Road		Amount of Each Disbursement this Period 200.00
City Spokane State WA Zip Code 99203	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Debra Todd for Justice Committee</b>		<b>Transaction ID:</b> SB29.15660 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address P.O. Box 42452		Amount of Each Disbursement this Period 500.00
City Pittsburgh State PA Zip Code 15203	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. DeLuca for Legislator Committee</b>		<b>Transaction ID:</b> SB29.15573 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address 1438 Homestead Road		Amount of Each Disbursement this Period 2000.00
City Verona State PA Zip Code 15147	Purpose of Disbursement Non Federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Elect Adrienne City Council</b>		<b>Transaction ID:</b> SB29.15593 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 23632 Highway 99		Amount of Each Disbursement this Period 300.00
City Edmonds State WA Zip Code 98026	Purpose of Disbursement Non Federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Elect Bill Sherman</b>		<b>Transaction ID:</b> SB29.15621 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 25896		Amount of Each Disbursement this Period 350.00
City Seattle State WA Zip Code 98165	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Elect Brian Sullivan</b>		<b>Transaction ID:</b> SB29.15581 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 1751		Amount of Each Disbursement this Period 700.00
City Everett State WA Zip Code 98206	Purpose of Disbursement Non Federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> 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)  
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) <b>A. Elect Keri Andrews</b>		<b>Transaction ID:</b> SB29.15597 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 6309		Amount of Each Disbursement this Period 350.00
City Bellevue State WA Zip Code 98008	Purpose of Disbursement Non Federal contribution Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Elect Mia for City Council</b>		<b>Transaction ID:</b> SB29.15639 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 7
Mailing Address 19220 39th Avenue, South		Amount of Each Disbursement this Period 250.00
City SeaTac State WA Zip Code 98188	Purpose of Disbursement Non federal contribuion Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Friends of Chelsa Wagner</b>		<b>Transaction ID:</b> SB29.15656 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address P.O. Box 96050		Amount of Each Disbursement this Period 2500.00
City Pittsburgh State PA Zip Code 15226	Purpose of Disbursement Non federal contribution Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3100.00
<b>TOTAL</b> 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)  
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) <b>A. Friends of David Della</b>		<b>Transaction ID:</b> SB29.15602 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 22088		Amount of Each Disbursement this Period 100.00
City Seattle State WA Zip Code 98122		
Purpose of Disbursement Non federal contribution	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>B. Friends of Jack Wagner</b>		<b>Transaction ID:</b> SB29.15575 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 99995		Amount of Each Disbursement this Period 2000.00
City Pittsburgh State PA Zip Code 15233		
Purpose of Disbursement Non Federal contribution	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>C. Friends of Jane Hague</b>		<b>Transaction ID:</b> SB29.15610 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 14150 NE 20th PMB 303		Amount of Each Disbursement this Period 600.00
City Bellevue State WA Zip Code 98007		
Purpose of Disbursement Non federal contribution	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Mary Verner</b>		<b>Transaction ID:</b> SB29.15649 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address P.O. Box 305		Amount of Each Disbursement this Period 200.00
City Spokane State WA Zip Code 99210	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Friends of Matt Smith</b>		<b>Transaction ID:</b> SB29.15655 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address P.O. Box 13445		Amount of Each Disbursement this Period 500.00
City Pittsburgh State PA Zip Code 15243	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Friends of Richard Rush</b>		<b>Transaction ID:</b> SB29.15652 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address P.O. Box 74		Amount of Each Disbursement this Period 200.00
City Spokane State WA Zip Code 99210	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Sherry Hazuda</b>		<b>Transaction ID:</b> SB29.15658 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address 1401 Dagmar Avenue		Amount of Each Disbursement this Period 100.00
City Pittsburgh State PA Zip Code 15216		
Purpose of Disbursement Non federal contribution	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends of Tom Rasmussen 2007</b>		<b>Transaction ID:</b> SB29.15617 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 4647		Amount of Each Disbursement this Period 350.00
City Seattle State WA Zip Code 98194		
Purpose of Disbursement Non federal contribution	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Gael for Port</b>		<b>Transaction ID:</b> SB29.15627 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 9100		Amount of Each Disbursement this Period 1400.00
City Seattle State WA Zip Code 98109		
Purpose of Disbursement Non federal contribution	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Herman Taylor for Montgomery County, LLC</b>		<b>Transaction ID: SB29.15631</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 7
Mailing Address 17801 Georgia Avenue c/o Sandy Spring Bank		Amount of Each Disbursement this Period 100.00
City Olney State MD Zip Code 20832		
Purpose of Disbursement Non federal contribution	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Hyland for Supervisor</b>		<b>Transaction ID: SB29.15633</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 7
Mailing Address P.O. Box 103		Amount of Each Disbursement this Period 350.00
City Mt. Vernon State VA Zip Code 22121		
Purpose of Disbursement Non federal contribution	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. John Lovick for Sheriff</b>		<b>Transaction ID: SB29.15579</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 2403 157th Place, SE		Amount of Each Disbursement this Period 500.00
City Mill Creek State WA Zip Code 98012		
Purpose of Disbursement Non Federal contribution	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	950.00
<b>TOTAL</b> 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)  
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) <b>A. Mark Herring for State Senator</b>		<b>Transaction ID:</b> SB29.15635 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 7
Mailing Address P.O. Box 6246		Amount of Each Disbursement this Period 250.00
City Leesburg State VA Zip Code 20178	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. MARTA</b>		<b>Transaction ID:</b> SB29.15644 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address P.O. Box 5655		Amount of Each Disbursement this Period 248.00
City Scottsdale State AZ Zip Code 85261	Purpose of Disbursement Refund of 2004 overpayment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. MARTA</b>		<b>Transaction ID:</b> SB29.15646 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address P.O. Box 5655		Amount of Each Disbursement this Period 311.00
City Scottsdale State AZ Zip Code 85261	Purpose of Disbursement Refund of 2002 overpayment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	809.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Maureen Judge for Mercer Island City Council</b>		<b>Transaction ID: SB29.15591</b> Date of Disbursement 10 / 04 / 2007
Mailing Address 2435 61st Avenue, NE		Amount of Each Disbursement this Period 300.00
City Mercer Island State WA Zip Code 98040	Purpose of Disbursement Non Federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. People for Sally Clark</b>		<b>Transaction ID: SB29.15601</b> Date of Disbursement 10 / 04 / 2007
Mailing Address P.O. Box 2041		Amount of Each Disbursement this Period 350.00
City Seattle State WA Zip Code 98111	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Ravenstahl for Mayor</b>		<b>Transaction ID: SB29.15641</b> Date of Disbursement 10 / 05 / 2007
Mailing Address P.O. Box 23648		Amount of Each Disbursement this Period 1000.00
City Pittsburgh State PA Zip Code 15222	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Ravenstahl for Mayor</b>		<b>Transaction ID:</b> SB29.15654 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address P.O. Box 23648		Amount of Each Disbursement this Period 200.00
City Pittsburgh State PA Zip Code 15222	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Re-elect Alec Fisken</b>		<b>Transaction ID:</b> SB29.15606 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 3412 NE 115th Street		Amount of Each Disbursement this Period 1400.00
City Seattle State WA Zip Code 98125	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Re-elect Jessica Greenway</b>		<b>Transaction ID:</b> SB29.15608 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 110 15th Avenue East		Amount of Each Disbursement this Period 400.00
City Kirkland State WA Zip Code 98033	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Re-elect Richard Hildreth</b>		<b>Transaction ID:</b> SB29.15612 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 312 3rd Avenue, SE		Amount of Each Disbursement this Period 250.00
City Pacific State WA Zip Code 98047	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Reelect John Chelminiak</b>		<b>Transaction ID:</b> SB29.15599 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 1391		Amount of Each Disbursement this Period 250.00
City Bellevue State WA Zip Code 98009	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Reelect Sally Soriano</b>		<b>Transaction ID:</b> SB29.15623 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 14051 1st SW		Amount of Each Disbursement this Period 300.00
City Seattle State WA Zip Code 98177	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Stephen Lamphear for Burien City Council</b>		<b>Transaction ID: SB29.15614</b> Date of Disbursement 10 / 04 / 2007
Mailing Address 12011-18th SW		Amount of Each Disbursement this Period 350.00
City Burien State WA Zip Code 98146	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Stuebing for Schools</b>		<b>Transaction ID: SB29.15625</b> Date of Disbursement 10 / 04 / 2007
Mailing Address P.O. Box 31258		Amount of Each Disbursement this Period 300.00
City Seattle State WA Zip Code 98103	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Terry Scott Shoreline Council</b>		<b>Transaction ID: SB29.15619</b> Date of Disbursement 10 / 04 / 2007
Mailing Address 519 NE 165th Street #101		Amount of Each Disbursement this Period 500.00
City Shoreline State WA Zip Code 98155	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1150.00
<b>TOTAL</b> 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)  
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial) <b>A. Vote for Rose</b>		<b>Transaction ID:</b> SB29.15647 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address 517 N. Sargent Road		Amount of Each Disbursement this Period 200.00
City Spokane Valley State WA Zip Code 99212	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Vote to Keep Judge James Committee</b>		<b>Transaction ID:</b> SB29.15665 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 7
Mailing Address 330 Frick Building 437 Grant Street		Amount of Each Disbursement this Period 500.00
City Pittsburgh State PA Zip Code 15219	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Vote Venus</b>		<b>Transaction ID:</b> SB29.15629 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 9100		Amount of Each Disbursement this Period 700.00
City Seattle State WA Zip Code 98109	Purpose of Disbursement Non federal contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1400.00
<b>TOTAL</b> 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)  
AMALGAMATED TRANSIT UNION-COPE

Full Name (Last, First, Middle Initial)

**A.** Washington State Democrats

Mailing Address P.O. Box 4027

City State Zip Code  
Seattle WA 98194

Purpose of Disbursement  
Non Federal contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.15574

Date of Disbursement

<sup>M</sup> /  <sup>M</sup> /  <sup>D</sup> /  <sup>D</sup> /  <sup>Y</sup> /  <sup>Y</sup> /  <sup>Y</sup> /  <sup>Y</sup>

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) .....

27309.00

Form/Schedule: **F3XN**

Transaction ID:

The unitemized total of \$36,736.28 represents total contributions from individuals who have not individually contributed more than \$200 in the aggregate during the calendar year. On January 2 and January 29, 2002 checks totaling \$311 each were received from the Metropolitan Atlanta Rapid Transit Authority (MARTA) and deposited into the ATU-COPE Voluntary Account. The invoices were paid twice by MARTA and refunded to on October 12, 2007. Of the \$311 no individual contributed over \$200. On April 26, 2004 a check for \$496 was received from MARTA and deposited into the ATU-COPE Voluntary Account. MARTA's Accounts Payable entered the invoice twice, each entry for \$248. A refund of \$248 was issued on October 12, 2007. Of the the \$248 no individual contributed over \$200.